

REPORT

ON THE

Health of the County Borough of Belfast for the Year 1945

BY THE

Medical Superintendent
Officer of Health





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BY

SAMUEL BARRON, M.R.C.P., D.P.H.

The Medical Superintendent Officer of Health for the City.

COUNTY BOROUGH OF BELFAST.

Public Health Committee

Chairman:

ALDERMAN THOMAS LÓFTUS COLE, L.P.S., J.P.

Deputy Chairman:

COUNCILLOR STUART KNOX HENRY, J.P.

Aldermen:

THOMAS LOFTUS COLE, L.P.S., J.P. THOMAS HENDERSON, M.P. FREDERICK WILLIAM KENNEDY. KENNEDY LEACOCK, J.P. ROBERT PIERCE, J.P. ANDREW SCOTT, J.P.

Councillors:

PERCIVAL BROWN, C.B.E., F.A.I.
SENATOR JOSEPH CUNNINGHAM, J.P.
FRANCIS HANNA, I.L.B.
STUART KNOX HENRY, J.P.
JAMES KILPATRICK, J.P.
WILLIAM JOHN LEEBURN.
FRANCIS BRERETON LOAN.
HERBERT NEILL.
CLARKE SCOTT, J.P.

COUNTY BOROUGH OF BELFAST—1945

Summary of Vital Statistics

Area (Census 1937)	(Exclusive of	of 1,262 a	cres of	
tidal water)	···		•••	15,289 acres.
Population		•••	•••	435,900 (estimate of Registrar-General for N.I.)
Marriages				4,290
Marriage Rate				9.8 per 1,000 of the popula-
9				tion.
Births Registered			•••	9,853
Birth Rate	•••			22.6
Births (notified)				11,307
Still Births (included	in total birth	ns notified)	•••	362
Birth Rate average for			945	21.5
Deaths				5,069
Death Rate				11.6
Death Rate average	for the ten ve	ars 1936-19	$945 \dots$	13.3
Deaths of Infants un				828
Infant Mortality Rat				84 deaths per 1,000 births.
Average for the ten				96 deaths per 1,000 births.
Neo-natal Deaths (u				391
Deaths from Pregr			1 1	001
Puerperal State			•••	18
Death Rate per total		tered		1.8
Deaths from Epider				272
Death Rate from Ep				0.6
Deaths from Measles			•••	10
Deaths from Typhoi		•••		1
Deaths from Scarlet			•••	$\stackrel{1}{2}$
Deaths from Whoop		•••	•••	$\frac{2}{26}$
Deaths from Diphthe	Aria	•••	•••	7
Deaths from Diarrho		oritic (und	···	•
- (•		172
Deaths from Dysente		•••	•••	1
Deaths from Influent		•••	•••	16
		the Deep		10
Deaths from Tube:	reulosis of	tne Kespi	ratory	326
System Death Rate from To	 .h.a	 : 41 - D:		320
Death Rate from Tu	iberculosis of	the Kespi	ratory	0.7
System Deaths from Branch	 : <u>.:</u> _	• • •	•••	0.7
Deaths from Bronch		•••	•••	243
Deaths from Plaurice		•••	•••	274
Deaths from Pleurisy			•••	4
Deaths from other	Diseases of	the Kespi	ratory	00
System (Tuberc	diosis excepte	ea)	•••	92

The Right Honourable the Lord Mayor (Councillor The Right Honourable Sir Crawford McCullagh, Bart., D.L., P.C.), and the Aldermen and Councillors of the County Borough of Belfast.

Public Health Department, City Hall,

June, 1946.

My Lord Mayor, Aldermen, and Councillors,

I have the honour to submit the Annual Report on the Public Health Services of the city for the year 1945.

This year will be recorded in history as an eventful period, for in it came the termination of the world war which had raged for nearly six years, bringing not only its terrible toll of death and destruction, but also conditions which one might have expected to adversely affect the health and well-being of the people. It would be reasonable to expect that hardship, privation, physical stress, and mental anxiety resulting from air raids, 'black-out,' food restrictions, bad housing, and many other war conditions would be reflected in very unsatisfactory public health records; yet, when we examine the statistical figures for 1945, we find that they bear favourable comparison with previous years, and indicate that the public health of the city in 1945 was much better than could have been anticipated.

The death rate at 11.6 per 1,000 of the population was the lowest rate on record for the city, with the exception of 1942, when it was 11.2.

The infantile mortality rate was 84 deaths of children under one year of age per 1,000 births; the rate for 1944 was 89, and for 1943, 111: the average for the ten year period 1936-1945 being 96. The maternal mortality rate of 1.8 per 1,000 registered births is the lowest on record for the city.

The deaths from pulmonary tuberculosis numbered 326, which was the lowest number on record; there were 354 deaths from pulmonary tuberculosis in 1944 and 367 in 1943. The number of deaths from the non-pulmonary forms of tuberculosis (80) was also the lowest on record; there were 89 deaths in 1944 and 117 in 1943. It would thus appear that the downward trend in the tuberculosis mortality in Belfast has been resumed after a moderate increase in 1940, 1941, and 1942. The number of deaths from pulmonary tuberculosis in 1914 was 836, thus showing a reduction of 61 per cent. in thirty-one years; the non-pulmonary deaths show a reduction of over 72 per cent. over the same period.

During the year a Mass Radiography Unit was provided by the Ministry of Health and Local Government, and installed in premises at No. 225 Albertbridge Road. The Unit came into operation in June.

The scheme for the payment of financial assistance to patients undergoing treatment for tuberculosis was largely taken advantage of during the year; the payment of treatment allowances, however, is limited to early hopeful cases, but it is hoped that the scheme will be extended to include all patients suffering from tuberculosis.

During the year the demand for institutional treatment of tuberculosis was greatly increased; the Tuberculosis Committee, after taking administrative control of the Tuberculosis Scheme in August, made arrangements for additional hospital beds for the treatment of tuberculosis patients at the Municipal Sanatorium, Whiteabbey, the Emergency Hospital, Musgrave Park, the Belfast City Hospital, and at Purdysburn. These arrangements increased the number of available beds at the end of the year to almost five hundred.

In spite of the considerable increase in beds available for institutional treatment, the waiting-list of patients seeking admission to hospital increased, and many patients required isolation in their homes. In an attempt to prevent the spread of infection in households where tuberculous patients were found to have unsatisfactory sleeping accommodation, the Tuberculosis Committee authorised the purchase of beds, blankets, and bedding, which were supplied for the use of such patients. Home isolation is at best merely a makeshift in many cases, but failing facilities for institutional isolation, we should make the most of any resources available.

One of the most pressing needs in Belfast is the provision of housing accommodation. It is estimated that some twenty-five thousand houses are required to meet the demand and remedy overcrowding. Bad environmental and social conditions, such as bad housing, overcrowding, malnutrition, etc., have a direct bearing on the causation of tuberculosis.

It might serve a useful purpose to refer to the necessity of an educational campaign against spitting in public; this is a practice that will have to be abolished if we are to make any headway against tuberculosis as well as other airborne or 'droplet' diseases. The slogan 'Coughs and Sneezes spread Diseases' should be extended to a warning that 'Spitting spreads T.B.'

Towards the end of the year, the Minister of Health and Local Government introduced a Bill in the Parliament of Northern Ireland to make provision for the prevention and treatment of tuberculosis. The Bill authorises the setting up of a Tuberculosis Authority for the whole of Northern Ireland.

Infectious Diseases

The number of infectious diseases notified during the year was well below the average; this was particularly the case with typhoid fever, scarlet fever, and diphtheria. The decreasing incidence of diphtheria coincides with the increase in the number of children immunised against the disease. An interesting table appears on page 25 of this report, which shows the age grouping of children immunised since October, 1936, and reveals that 15,434, or 48 per cent. of children under five years of age were immunised at the end of 1945; 64 per cent. of the 5 to 10 years age-group and 56 per cent. of the 10 to 15 years age-group were immunised during the same period. Although these figures are fairly satisfactory, we must require a larger measure of protection, especially for the under-five age-group. We are still far from the ideal of having all children at or before the age of one year immunised.

Smallpox

It is disquieting to learn from the annual report of the School Medical Services that 18 per cent. of the children examined did not show evidence of having been vaccinated at the present time, when large numbers of people are returning to this country from areas where smallpox is endemic. During the year 1945, we received notifications of forty-six persons arriving in Belfast who had been in contact with smallpox on board vessels arriving at British ports from the Far East. These contacts were kept under surveillance during their quarantine period: none of them developed the disease.

In connection with the report of the Medical Superintendent of Purdysburn Fever Hospital, reference is made to twenty-six patients treated with Penicillin with satisfactory results.

Maternity and Child Welfare

The section of this Report dealing with the Maternity and Child Welfare gives full details of the work carried out under the extended scheme.

School Medical Services

The Annual Report of the School Medical Services is incorporated in the report of the Director of Education.

Sanitary Inspection

It can now be revealed that 56,662 houses in the city were damaged by enemy air raids during the war; 3,200 of these were completely demolished. The loss of these houses and the cessation of building operations during the war years have created a very grave housing problem. This shortage of housing accommodation has created a large amount of overcrowding. The disrepair of property and the delay in having repairs effected had the effect of greatly increasing the number of complaints received from householders for investigation by the Sanitary Officers. A short period of extremely cold weather early in the year caused much damage by the freezing and bursting of water-pipes, cisterns, and boilers, and thus added to the work and responsibilities of the Sanitary Inspection staff.

Port Sanitary Regulations

Constant vigilance on the part of the Port Sanitary staff keeps in check the possible danger of imported infectious diseases, such as smallpox, typhus, cholera, or plague. As previously indicated, there is now much passenger traffic, both sea and airborne, between British and foreign ports. Owing to the increased speed of travel, the danger of disease from "infected" foreign countries is greatly increased.

Supervision of Food

The supervision and control of food in factories, stores, shops, restaurants, and catering establishments required the constant attention of Food Inspectors, whilst the taking of samples of food to detect adulteration was energetically pursued.

On the 1st November, 1945, Dr. Charles S. Thomson, your former Medical Superintendent Officer of Health and Port Medical Officer, retired, after holding office for almost seventeen years. Various Committees of the Corporation with whom he was associated showed appreciation of his services to the city during his term of office, and these appreciations have been recorded in the minutes of proceedings of the Committees.

Before concluding this report, I should like to express my grateful thanks to the chairman and members of the various Committees dealing with the public health services of the Corporation for the kindness and support which I have received in carrying out the important duties for which I am responsible. I should also like to pay tribute to my brother officers throughout the various sections of the Public Health Department for their loyal co-operation and help.

I have the honour to be,

My Lord Mayor, and Gentlemen,

Your obedient Servant,

S. BARRON,

Medical Superintendent Officer of Health and Port Medical Officer.

TABLE I

COUNTY BOROUGH OF BELFAST

Causes of Death at Different Age Periods

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TABLE I-continued

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TABLE I-continued

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TABLE 1—continued

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Detailed	Inter- national List Nos.	158-161	162	163, 164	170 169, 171–195	197	163–195 197, 198	199, 200

The principal causes of death (in order of importance) were as follows:-

1. Heart disease	-	-	-	-	-	_	1,130
2. Cancer -	-	_	-	-	-	-	664
3. Pulmonary tubero	ulosis	-	-	-	-	-	326
4. Bronchitis -	-	-	-	-	-	-	243
5. Diarrhœa and ent	eritis	-	-	-	-	_	188
6. Senile decay	-	-	-	_	-	_	221
7. Premature births	(still-bi	rths e	excluded)	-	-	_	155
8. Pneumonia and bro				-	-	_	274
9. Violence -	- '	-	-	-	_	_	142
10. Nephritis -	-	-	_	-	-	_	77

TABLE II

Trend of mortality from the four principal causes of death in Belfast from 1936:—

Year	Heart Disease	Cancer	Pulmonary Tuber- culosis		Respiratory Tract
1936	 1,280	 585	 406		724
1937	 1,306	 564	 414		795
1938	 1,314	 568	 348		691
1939	 1,344	 572	 365		580
1940	 1,387	 576	 412		840
1941	 1,277	 570	 426	٠	685
1942	 995	 633	 369		546
1943	 1,116	 613	 367		655
1944	 1,098	 620	 354		523
1945	 1,130	 664	 326		517

A reference to Table II will show the trend of mortality from the four principal causes of death: these are in the same order and relative proportions as occur in other parts of the country. They account for the great bulk of deaths.

HEART DISEASE.—Stress has been laid on deaths from heart disease and to the fact that the majority of them are found to be recorded in the later age groups, giving rise to the supposition that they represent a degenerate condition rather than an infective one. It may be, however, that the degenerative change in many cases was the result of an infective condition in earlier life, particularly juvenile carditis. On this hypothesis many forms of heart disease could be regarded as preventable diseases.

Cancer.—The trend of mortality in the case of cancer, as judged by recorded deaths from the disease, is on the increase. The increase is due in part to the fact that there is a steady increase in the population in the middle and later age groups in which malignant disease is more common; the increase is also due in part to better diagnosis and better certification of the causes of death.

Pulmonary Tuberculosis.—Reference has already been made to the decreasing trend in the mortality from all forms of tuberculosis.

RESPIRATORY TRACT.—The trend of mortality from diseases of the respiratory tract varies from year to year and is largely dependent upon epidemic prevalence of these diseases.

TABLE III

Shewing the number of deaths at various age periods, the percentage of the total number registered, and the death-rates per 1,000 of the population.

				No. of Deaths	Percentage of Total Deaths	Death Rate per 1,000 of the Population
Under 1 year -	-	-	-	828	 16.3	 1.9
1 year and under 5 years	-	-		125	 2.5	 0.3
5 years and under 25 years	-	-	-	253	 5.0	 0.6
25 years and under 45 years	-	-	-	454	 8.9	 1.0
45 years and under 65 years	` -	-	-	1,220	 24.1	 2.8
65 years and upwards	-	-	-	2,189	 43.2	 5.0
				<u> </u>		

Total 5,069

TABLE IV

Shewing the number of Deaths registered as having been caused by Phthisis and Diseases of the Respiratory Organs during the twenty years, 1926-1945.

YEAR		Population	Phthisis	Rate per 1,000		Diseases of the Respiratory System		Total Chest Affections
					Pneumonia	Others	Total	
1926		416,000	570	1.4	516	630	1,146	1,716
1927		416,000	515	1.2	479	526	1,005	1,520
1928		415,151	499	1.2	521	542	1,063	1,562
1929		415,151	485	1.2	680	761	1,441	1,926
1930		415,151	436	1.0	357	482	839	1,275
1931		415,151	452	1.1	518	479	997	1,449
1932		415,151	448	1.1	539	461	1,000	1,448
1933		415,151	429	1.0	583	605	1,188	1,617
1934		415,151	398	0.96	434	421	855	1,253
1935		415,151	389	0.93	597	445	1,042	1,431
1936		436,000	406	0.93	450	373	823	1,229
1937		438,112	414	0.95	503	405	908	1,322
1938	,	443,500	348	0.78	465	294	759	1,107
1939		443,500	365	0.82	316	357	673	1,038
1940		444,500	412	0.93	404	539	943	1,355
1941		444,500	426	0.96	330	446	776	1,202
1942		444,500	369	0.83	325	298	623	992
1943		425,000	.367	0.86	451	291	742	1,109
1944		430,800	354	0.82	315	286	601	955
1945		435,900	326	0.75	274	339	613	939

TABLE V

Showing the number of deaths from Epidemic Diseases during the ten years 1936—1945.

	Whooping	64	32	51	35	54	19	6	40	22	26
	Dysentery		_		1		1	1		_	-
	Diarrhæa	258	193	163	216	316	202	182	310	202	188
	Influenza	46	218	57	50	161	88	81.	50	21	16
٥	Measles	7	27	224	13	150	1	17	=	_	10
	Cerebro- Spinal Fever	33	2	∞	ıc.	22	20	13	2	~	7
	Puerperal Fever	22	20	12	9	7	m	9	=	4	5
	Diphtheria	38	4	=	34	82	95	15	9	=	7
	Scarlet Fever	13	7	∞	~1	9	7		~	?	C 1
	Typhoid Fever	-	7	1	1	_	1	1	4-	1	_
۵	Typhus Fever	-	1	1	1	1	1			1	'
	Smallpox		1	1	-		1	1	-	1	1
	YEAR	1936	1937	. 1938	1939	1940	1941	1942	1943	1944	. 1945

TABLE VI

Shewing the Population, the number of Births, the Birth Rate per 1,000, the number of Deaths, the Death Rate per 1,000, and the natural increase during the twenty years, 1926-1945.

Morning	Increase	3,945	3,856	3,552	2,437	4,107	3,613	3,099	2,281	3,410	2,610	3,035	2,809	3,077	3,208	2,121	1,742	4,686	5,202	5,280	4 784
Doorh Dore	per 1,000	15.4	13.6	14.0	15.6	12.9	14.1	13.9	15.2	13.7	15.0	● 14.2	14.5	13.7	12.9	14.8	14.9	11.2	13.0	12.0	116
V. 0.6	Deaths	6,411	5,653	5,804	6,462	5,451	5,857	5,783	6,318	5,676	6,238	6,207	6,341	6,069	5,758	6,583	6,641	4,973	5,511	5,176	5 069
Birth Dare	per 1,000	24.9	22.9	22.5	21.4	22.7	22.8	21.4	20.7	21.9	21.3	21.2	20.9	20.6	20.2	19.6	18.9	21.7	25.2	24.3	226
No of	Births	10,356	6,509	9,356	8,899	9,558	9,470	8,882	8,599	9,086	8,848	9,242	9,150	9,146	996'8	8,704	8,383	659'6	10,713	10,456	9.853
•	Population	416,000	416,000	415,151	415,151	415,151	415,151	415,151	415,151	415,151	415,151	436,000	438,112	443,500	443,500	444,500	444,500	444,500	425,000	430,800	435,900
		:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	
	YEAR	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935	1936	1937	1938	1939	1940	1941	1942	1943	1944	1945

TABLE VII

Shewing the number of cases of infectious diseases notified during the ten years 1936—1945, pursuant to the Infectious Disease (Notification) Act, 1889.

Erysipe-	135	128	119	134	115	83	82	09	29	76
Puerperal Fever	. 22	11	14	7	σ,	ĸ	12	2	۱۸	
Polio- myelitis	7	2	8	· 10	2	7	ľΛ	2	M	20
Cerebro- Spinal Meningitis	14	20	35	12	166	246	122	75	48	39
Diph- theria	1053	847	664	989	1165	683	427	322	217	213
Scarlet Fever	1811	1486	2107	1696	1266	453	778	1964	1679	768
Typhoid Fever	21	21	12	20	17	44	10	29	٧٠	14
	1936 -	1937 -	1938 -	1939 -	1940 -	1941 -	1942 -	1943 -	- ++61	1945 -

Whooping Cough - 603

1,702

Measles -

TABLE VIII

Shewing the number of deaths from Cancer and other Tumours for the year 1945, as compared with the preceding five years.

It will be seen from the above table that the average number of deaths registered annually as having been caused by Cancer and other Tumours during the quinquennial period 1940 to 1944 was 625 (290 males and 335 females).

It should be noted that the above Table includes non-malignant tumours and tumours of undetermined nature.

Infectious Diseases

SCARLET FEVER.

768 cases were notified during the year, but on investigation 26 were found not suffering from the disease, which made the total number that occurred during the year 742, an attack-rate of 1.7 per 1,000 of the population.

The number of cases which occurred during the preceding year was 1,632, and the average number notified annually during the ten years 1935—1944 was 1,663.

2 deaths occurred, equivalent to a case mortality-rate of 0.3 per cent., or a deathrate of 0.005 per 1,000 of the population. There were 2 deaths in the preceding year. The average number annually during the ten years 1935—1944 was 9.

DIPHTHERIA.

213 cases were notified, but on investigation 23 were found not suffering from the disease. In addition to those notified, one case notified as scarlet fever was found to be suffering from diphtheria, which made the total number that occurred during the year 191; an attack-rate of 0.4 per 1,000 of the population.

The number of cases that occurred during the preceding year was 173, and the average number notified annually during the ten years 1935—1944 was 726.

7 deaths occurred, equivalent to a case mortality-rate of 3.6 per cent., or a death-rate of 0.02 per 1,000 of the population. The number of deaths in the preceding year was 11, and the average number annually during the ten years 1935—1944 was 33.

TYPHOID FEVER.

14 cases were notified during the year, but on investigation 2 were found not suffering from the disease, which made the total number that occurred during the year 12; an attack-rate of 0.03 per 1,000 of the population.

The number of cases which occurred during the preceding year was 28, and the average number notified annually during the ten years 1935—1944 was 30.

1 death occurred during the year, equivalent to a case mortality-rate of 8.3 per cent., or a death-rate of 0.002 of the population. No deaths occurred in the preceding year; the average number occurring annually during the ten years 1935—1944 was 2.

ERYSIPELAS.

76 cases were notified during the year. The number of cases that occurred in the preceding year was 67, and the average number notified annually during the ten years 1935—1944 was 108.

CEREBRO-SPINAL FEVER.

39 cases were notified during the year, 9 of which were found not suffering from the disease, making the total number of cases that occurred during the year 30; an attack-rate of 0.07 per 1,000 of the population. Of these, 2 deaths occurred, equivalent to a case mortality-rate of 6.7 per cent., or a death-rate of 0.005 per 1,000 of the population.

MEASLES.

1,702 cases of Measles were notified during the year, an attack-rate of 3.9 per 1,000 of the population.

The number of cases that occurred during the preceding year was 3,048.

10 deaths occurred during the year, 1 occurred in the preceding year, and the average number annually during the ten years 1935—1944 was 70.

WHOOPING-COUGH

603 cases of Whooping-Cough were notified during the year, an attack-rate of 1.4 per 1,000 of the population.

The number of cases notified during the preceding year was 734.

26 deaths were caused by whooping-cough, equivalent to a death-rate of 0.06 per 1,000 of the population. In the preceding year the number of deaths from this disease was 22, and the average number registered annually during the ten years 1935-1944 was 35.

DIARRHŒA AND ENTERITIS.

172 deaths of children under 2 years of age were caused by this disease during the year, equivalent to a death-rate of 0.39 per 1,000 of the population.

The number of deaths that occurred during the preceding year was 184, and the average number of deaths annually during the ten years 1935—1944 was 210.

PUERPERAL FEVER.

One case of this disease was notified. The number of cases notified during the preceding year was 5, and the average number notified annually during the ten years 1935—1944 was 12.

EPIDEMIC DISEASES.

258 deaths were caused by epidemic diseases during the year, equivalent to 5.1 per cent. of the total number of deaths from all causes, or a death-rate of 0.6 per 1,000 of the population. During the preceding year the deaths from epidemic diseases numbered 242, equivalent to 4.7 per cent. of the total deaths, or a death-rate of 0.6.

One, or 0.4 per cent. of the total deaths from epidemic diseases, was caused by typhoid fever; 2, or 0.8 per cent., by scarlet fever; 7, or 2.7 per cent., by diphtheria; 5, or 1.9 per cent., by puerperal fever; 2, or 0.8 per cent., by cerebro-spinal fever; 10, or 3.9 per cent., by measles; 16, or 6.2 per cent., by influenza; 188, or 72.9 per cent., by diarrhœa and enteritis; 1, or 0.4 per cent., by dysentery; and 26, or 10.8 per cent., by whooping-cough.

Infectious Diseases

CORRECTED DIAGNOSIS FOR 1945.

Two cases of typhoid fever, 26 cases of scarlet fever, 23 cases of diphtheria, and 9 cases of cerebro-spinal fever were found not suffering from the disease notified. Of these, 5 scarlet fever were found to be suffering from measles and one scarlet fever was found to be suffering from diphtheria. The remainder were found not to be suffering from any notifiable disease.

Venereal Diseases

Statement showing the services rendered at the Treatment Centre at Royal Victoria Hospital, Belfast, during the year ended 31st March, 1946, classified according to the areas in which the patients resided.

Тотац		394	508	:	2,005	2,907	21,497	2,127	11,835	131
Travelling		:		÷ ,	:		۲۱	:	:	:
Gibraltar Evacuees		~	33	. :	÷	9	79	73	18	<u>:</u>
Port		23	36	:	22	8.	334	29	197	9
Co. Donegal		:	÷	÷	:	:	:	91	÷	:
Co. Tyrone		9	6	:	∞	23	147	45	121	13
Co. Fermanagh		:	-	:	:	1	~	:	:	:
Co. Derry		9		:	v	19	177	444	135	37
Co. Armagh		. 2	4	:	10	16	81	. 86	51	74
Co. Antrim		. 31	33	:	37	101	1,479	350	1,233	16
Co. Down		13	25	:	31.	69	710	. 27	539	9
Belfast		310	389	:	1,891	2,590	18,486	1,078	9,541	36
NAME OF COUNTY OR COUNTY BOROUGH	A. Number of cases from each area dealt with during the year for the first time and found to be suffering from:—	Syphilis	Gonorrhæa	Soft Chancre	Conditions other than Venereal -	Total	B. Total number of attendances of all patients residing in each area	C. Aggregate number of "In-patient days" of all patients residing in each area -	D. Number of doses of arseno- benzol compounds given Clinic - Clinic - Clinic -	Dept to patients residing in each area

Venereal Diseases

Return relating to all Persons who were treated at the Treatment Centre at Royal Victoria Hospital, Belfast, during the year ended 31st March, 1946.

	Sypн	Syphilis	GONORRHOEA	КНОЕА	Soft C	Soft Chancre	CONDITIONS OTHER THAN VENEREAL	OTHER THAN	Тотаг	[AL	
Number of case which	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females	
(a) at the under (b) had b having	4,370	2,134	3,757	130	i	i	:	ï	8,127	2,264	
other Centres, and which returned to the Treatment Centre during the year under report suffering from the same infection	66	‡	77	2	:	÷		i	176	9,	
Total—Items 1 (a) and (b)	4,469	2,178	3,834	132		:	:	:	8,303	2,310	
2. (a) Number of cases dealt with at the Treatment Centre during the year for the first time	252	142	431	12	:	*	1,402	603	2,085	822	
Total_Items 1 (a), 1 (b), and 2 (a) -	4,721	2,320	4,265	209	:	-	1,402	605	10,388	3,132	
2. (b) Number of cases included in Item 2 (a) known to have received previous treatment at other Centres for the same infection -	25	œ	12	:	:	:	:	:	37	00	
3. Number of cases which ceased to attend— (a) before completing the first course of treatment for	. 18	15	38	10	:	:	:	:	56	25	
(b) after one or more courses, but before completion of treatment for completion of treatment but before final	7	9	39	6	÷	:		i	46	15	
tests as to core of the test of the transferred to other Treatment	:	:	:	:	:	:	:	:	:	:	
	20	11	21	3	:	:	:	:	41	1	
	:	÷	171	÷	÷	:	:	:	171	i	
under report, were under treatment or observation for	4.676	2,288	3,996	187	i	:	* * * * * * * * * * * * * * * * * * * *	:	8,672	2,475	
Total-Items 3, 4, 5, and 6	4,721	2,320	4,265	209	:	:	:	:	8,986	2,529	
7. Out-patient attendances: — (a) For individual attention by the Medical											
(b) For intermediate treatment, e.g., irrigation, dressings, etc.	: :	: :	5,618	: :	: :	: :	: :	: :	5,618	: :	
TOTAL ATTENDANCES	i	:	:		:	:	:	:	:	:	21,497
8. Aggregate number of "In-patient days" of treatment given to persons who were suffering from -	396	451	818	462	:	:	:	:	1,214	913	

Venereal Diseases

Statement showing the services rendered at the Treatment Centre at Mater Infirmorum Hospital, Belfast, during the year ended 31st March, 1946, classified according to the areas in which the patients resided.

Тотаг		139	168	:	456	763	5,494	411	1,931	102		
Port	*	∞	13	÷	÷	21	79	÷	30	:		
Co. Armagh		_		;	:		4-	:	7	:		
Co. Tyrone				:	i.		10	i	C 1	:		
Co. Fermanagh		2	-	:	:	20	· ·	, 04	:			
Co. Derry		:	_	:	:	-	4	:	:	:		
Co. Down		7.	no	:	:	13	92	22	13	∞		
Co. Antrim		12	7	:,	:	19	136	44	57	=		
Belfast		110	136	;	456	702	5,182	305	1,827	75		
NAME OF COUNTY OR COUNTY BOROUGH	A. Number of cases from each area dealt with during the year for the first time and found to be suffering from:—	Syphilis	Gonorrhæa	Soft Chancre	Conditions other than Venereal	Total	B. Total number of attendances of all patients residing in each area	C. Aggregate number of "In-patient days" of all patients residing in each area -	D. Number of doses of arseno- benzol compounds given	_	to patients residing in each area	

Venereal Diseases

Return relating to all Persons who were treated at the Treatment Centre at Mater Infirmorum Hospital, Belfast, during the year ended 31st March, 1946.

	Syphilis	ILIS	GONORRHOEA	вноел	Soft C	Soft Chancre	CONDITIONS	CONDITIONS OTHER THAN VENEREAL	Tc	Тотаг
	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females
(a) at the beginning of the year under report were under treatment or observation for - (b) had been marked off in a previous year as	245	69	31	7	i	:	30	21	306	
naving ceased to attend or as transferred to other Centres, and which returned to the Theatment Centre during the year under report suffering from the same infection	1	:	÷	!	÷	:	m	-		-
Total—Items 1 (a) and (b)	249	69	31	7	:	:	33	22	313	86
2. (a) Number of cases dealt with at the Treatment Centre during the year for the first time	97	42	133	35	:	:	204	252	+3+	329
Total-ltems 1 (a), 1 (b), and 2 (a) -	346	111	164	42	:	<u>;</u>	237	274	747	427
2. (b) Number of cases included in Item 2 (a) known to have received previous treatment at other Centres for the same infection -	29	9	16	20	:		:	:	45	6
3. Number of cases which ceased to attend— (a) before completing the first course of treatment for	۲۰			:	:	:	:	:	7.	:
(b) after one or more courses, but before completion of treatment for	13	4	10	:	:	:	:	:	23	4
	9+	œ	48	۲	:	;	;	÷	7.	13
	34	2	21	:	:	:	:	. :	55	2
5. Number of cases discharged after completion of treatment and observation for the Mumber of cases which at the and of the year	42	ox.	99	15	:	÷	:	:	107	23
	206	68	20	22	:	:	:	:	226	111
Total—Items 3, 4, 5, and 6	346	111	164	42	:	:	:	:	510	153
nt attendances: —										
, the	2,112	566	812	218	÷	:	387	418	3,311	1,631
dressings, etc	174	137	116	125	:	:	:	:	290	262
TOTAL ATTENDANCES	2,286	1,132	928	343	:	:	387	418	3,601	1,893
8. Aggregate number of "In-patient days" of treat- ment given to persons who were suffering from -	184	210	10	7	:	:	:	:	154	217

clinics, schools, and institutions, 1,452 by private practitioners with material supplied by the Department, and 34 by the During the year 7,751 persons completed a course of treatment against diphtheria; of these, 6,625 were immunised at Purdysburn Fever Hospital, while undergoing treatment for scarlet fever medical staff at

The total number of persons who had completed a course of treatment from the inception of the works in October, 1936, until the end of December, 1945, details of whose age grouping are given in the table below, was 72,800

In addition, 2,445 children received reinforcing injections.

		F	at end of 1945	15,434	Equal to 48% of	tnis age-group	i i	under 10 years at	end of 1945 25.637	Equal to 64% of	tnis age-group		under 15 years at	end of 1945 22.442	Equal to 56% of	this age-group	Total over 15 years 9,287
1936.	1945	33	2445	1474	614	358	542	810	678	360	170	71	44	18	40	27	29
October,	1944	69	2492	1329	628	, 455	663	596	802	492	251	107	44	33	47	26	25
sed since	1943	36	2576	1642	1043	266	1022	1133	963	902	382	222	81	73	78	40	37
grouping of children immunised since October, 1936	1942	71	1634	1373	985	937	929	1123	1017	295	315	221	103	85	98	09	180
of childre	1941	33	906	1405	1258	1228	1262	1408	1356	995	647	433	200	213	171	141	78
grouping	1940	17	299	335	285	346	508	818	756	399	182	88	61	33	22	20	11
ving age	1939	9	253	204	205	268	366	959	753	420	223	119	50	29	28	17	24
Table shewing age	1938	21	413	363	450	534	069	1209	1539	1233	899	295	127	95	77	62	58
	1936-37	27	362	470	539	527	814	1336	1281	905	645	506	358	289	192	136	148
	Age at Date of Inoculation	Under 1 year -	1 year	2 years	3 years	4 years	5 years	6 years -	7 years	8 years	9 years	10 years -	11 years -	12 years -	13 years -	14 years	Over 15 years -

Mosquito Control

Attention was again directed during the year to draining and spraying in order to remove the breeding-places of the mosquito. 57 samples of larvæ were taken and brought to the Department for examination. Ten of these were found not to be mosquito larvæ.

395 gallons of "Civic" Fluid, 2,040 gallons of waste condenser oil, and 30 gallons of waste motor oil were used in spraying.

Treatment of Scabies

During the year 2,756 treatments were carried out at the Scabies Clinic at the Disinfecting Station, Laganbank Road.

Port Sanitary Authority, Belfast

Report for the Year 1945

I.—Amount of Shipping Entering the Port During the Year.

TABLE A

Number	Inspected	Number Reported to be Defective	Number of Vessels Number of Vessels on which Defects	Vessels reported as having or having had during the
By Medical Officer	By Sanitary Inspector	Defective	Were Remedied	voyage Infectious Disease on Board
68	1913	604	587	11

TABLE C
Cases of Infectious Sickness landed from vessels.

Disease -	NUMBER OF CAS	SES DURING 1945	Number of Vessels
DISEASE	Passengers	Crew	Concerned
Tuberculosis	3	1	4
Measles Typhoid Fever -		2	2

TABLE D

Cases of Infectious Sickness occurring on vessels during the voyage, but disposed of prior to arrival.

Disease		Number of Cas	es During 1945	Number of Vessels
DISEASE		Passengers	Crew	Concerned
Typhoid Fever Measles -	-	•	1 1	1 1
Tuberculosis - Smallpox -	-		1 1	1 1

No case of plague, cholera, yellow fever, smallpox, or typhus fever occurred, and no plague-infected rats were discovered during the year.

THE PARROTS (PROHIBITION OF IMPORT) REGULATIONS, 1930.

No notices were served during the year under above Regulations.

NUMBER OF RATS DESTROYED DURING THE YEAR.

TABLE E

(1) On Vessels.

Destroyed	Examined	Found to be Infected with Plague
390	376	None

TABLE F

(2) In Docks, Quays, Wharves, and Warehouses.

Destroyed	Examined	Found to be Infected with Plague
120	104	None

TABLE G

Measures of Rat Destruction on Plague "Infected or Suspected" Vessels, or Vessels from Plague Ports arriving in the Port during the year.

Number of such vessels on which measures of rat destruction were not carried out	4
Number of rats killed	13
Number of such vessels on which trapping, poisoning, etc., were employed	5
Number of rats killed	40
Number of such vessels fumigated with HC.n	2
Number of rats killed	i
Number of such vessels fumigated with So2	÷
Total Number of such such vessels vessels with So2	11

TABLE H

Deratization Certificates and Deratization Exemption Certificates issued during the year.

TOTAL CERTIFICATES ISSUED			29				
NUMBER OF	Number of Deratization Exemption Certificates Issued				Deratization Exemption Certificates Issued		13
	. 1	Тотаг	16				
TIZATION CERTIFICATE	After Trapping,	Poisoning, etc.	•				
	HC.n and Sulphur	:					
NUMBER OF DE	FTER FUMIGATION WITH	Sulphur	:				
AFTE	AFT	HC.n	16				
Number of Ships			29				

VI.—HYGIENE OF CREWS' SPACES.

TABLE J
CLASSIFICATION OF NUISANCES.

Nationality of Vessel	Number Inspected during 1945	Defect of Original Construction	Structural Defects through wear and tear	Dirt; Vermin and other conditions prejudicial to health		
British	1612	21	24	476		
Other Nationalities -	301	15	11	115		

VII.—FOOD INSPECTION.

During the year, 22 tons 1 cwt. 3 qrs. 2 lbs. of unsound foodstuffs were seized, and destroyed or disposed of otherwise than for the food of man.

Report on the Administration of the Factories Act (Northern Ireland), 1938, for the Year 1945.

Part 1.—INSPECTIONS for the purposes of provisions as to health, including Inspections made by Sanitary Inspectors.

		Number of	
Premises (1)	Inspections (2)	Written Notices (3)	Occupiers Prosecuted (4)
Factories with mechanical power	1,631	150	
Factories without mechanical power	1,131	. 80	
*Other premises under the Act (including works of building and engineering construction, but not including outworkers' premises)	1,417	47	
Total	4,179	277	

^{*}Electrical Stations should be reckoned as factories.

Part 2.—DEFECTS FOUND.

	Nu	Number of defects in respect of		
Particulars	Found	Remedied	Referred to Chief Inspector	which Prosecutions were instituted
(1)	(2)	(3)	(4)	(5)
Want of cleanliness (S.1)	278	274		
Overcrowding (S.2)	3	3		
Unreasonable temperature (S.3)				
Inadequate ventilation (S.4)	11	11		
Ineffective drainage of floors (S.6)	1	1		
(Insufficient	19	13	,	
Sanitary Conveniences (S.7) { Unsuitable or defective;	163	137		
Not separate for sexes	2		•••	
Other offences (excluding offences relating to Home Work, which are included in Part 3 of this report)	72	52	1	3
Breach of special sanitary requirements for bakehouses (S.56 to S.59)	35	25		
Total	584	516	1	3

Part 3.—HOMEWORK.

Number of Inspections	COTWORKT	(Section 115)	Outwork in Infected Premises (Sections 116 and 117)				
of Out- workers' Premises (2)	Instances (3)	Notices Served (4)	Prose- cutions (5)	Instances (6)	Orders Made (S. 117) (7)	Prose- cutions (Ss.1!6&117) (8)	
1,827	76	76		3	3		
1,525	62	62		2	2		
74	10	10					
3,426	148	148		5	5		
	of Out-workers' Premises (2) 1,827 1,525 74	of Out-workers' Premises (2) Instances (3) 1,827 76 1,525 62 74 10	1,827 76 76 1,525 62 62 74 10 10	1,827 76 76 1,525 62 62 1,74 10 10	of Outworkers' Premises (2) Instances (3) Notices Served (4) Prosecutions (5) Instances (6) 1,827 76 76 3 1,525 62 62 2 74 10 10	of Outworkers' Premises (2) Instances (3) Notices Served (4) Prosecutions (5) Instances (8, 117) (7) 1,827 76 76 3 3 1,525 62 62 2 2 74 10 10	

Sanitary Report for the Year

SUMMARY OF INSPECTIONS.

Houses, Shops, Schools, Commo	on Lodging	Houses,	Milk-	
shops, Piggeries, Stabling	Yards, Tip	oping Gro	ounds,	
Offensive Trades, etc	•••			154,714
Drain Tests	•••	•••		402
Nuisances discovered and compla	nined of	•••		72,544
Sanitary improvements carried ou	ıt			26,979

Sale of Food and Drugs Acts

During the Year 1,300 Samples were taken for Analysis.

Return shewing particulars of adulterated samples.

Nature of Sami	PLE	Samples Taken		Adulterations		Prosecutions		Convictions		Probation of Offenders Act	Fine £ s.	
Baking Powder -	-	- 30		1		_		_		_	_	
Buttermilk -	-	- 26		9		7		7		_	9 0	0
Buttermilk (informal)	-	- 8		4		-		—		_	_	
Dripping -	-	- 1		1		_				_	_	
Golden Raising Powde	er -	- 3		1		_		—		_	_	
Ice Cream (informal)	-	- 14		1		_		—		—	_	
Sauce -	-	- 14	• • • •	1		—				—	_	
Sauce (informal) -	-	- 3		1		—		_		_	_	
Soup (tinned) (inform	al)	- 3		1		—		—	`	_	_	
Sweetmilk -	-	- 541		20		7		6		1	4 10	0
Sweetmilk (informal)	-	- 115	•••	6	•••	_	•••	_		_	_	
								•			£13 10	0

In the foregoing return, the term "informal" is used where the formalities of the Sale of Food and Drugs Acts were not observed in taking the samples.

Cases of Adulteration in which no Legal Proceedings were taken.

FORMAL SAMPLES:

1 of Baking Powder, 2 of Buttermilk, 1 of Dripping, 1 of Golden Raising Powder, 1 of Sauce, and 13 of Sweetmilk.

Public Health Acts

Unsound foodstuffs inspected by the Food and Drugs Inspectors under above Acts, and destroyed or disposed of otherwise than for the food of man, under their supervision.

2 (10		D
2,610	tins	Beans.
3	,,	Benger's Food.
1,261	"	Fish.
171	19	Fruit.
8	77	Groats.
576	11	Health Salts.
146	"	Jam.
35	"	Lemon Powder.
1,227	"	Meat.
2,576	"	Meat and Fish Paste.
669	"	Condensed Milk.
, 19	"	Neave's Food.
139	"	Peas.
1,555	"	Soup.
28	"	Syrup.
499	,,	Vegetables.
51	,,	Unlabelled Foodstuffs.
15	gallons	Treacle.
2	,,	Pickles.
45		Puddings.
51		Fowl.

also 160 Jars, 32 Cartons, 1,178 Bottles, 2,622 Packets, and 26 tons 12 cwt. 3 qrs. and 16 lbs. of miscellaneous items.

TABLE IX

Legal Proceedings								
Under Public Health Acts—		Summonses	Orders	£	S	d		
For abatement of nuisances		1,580	93	23	5	0		
Disobedience of Justices' Orders		9	_	10	15	0		
For having deposited for the purpose of sale unsound food For failing to take all reasonable pre-	•••	4	_	39	0	0		
cautions to secure the cleanliness of premises in which food was stored For failing to take all reasonable pre-		2	_	20	0	0		
cautions to prevent contamination of food For obstructing a Sanitary Officer in		1	· _	5	0	0		
the execution of his duty		1	_	. 3	0	0		
Under Preservatives in Food Regulations	,	' 1		2	0	0		
Under Sale of Ice Cream Act		1	_	5	0	0		
Under Sale of Food and Drugs Act	•••		_	13	1 0	0		

TABLE X

Rainfall

The following Table, kindly supplied by Mr. D. McGarrigle, Secretary and Registrar to the Belfast City and District Water Commissioners, shows the rainfall in inches during the several months of the year as recorded at the Water Works at Old Park.

к.					1949
January		• • •			4.57
February	•••		•••	•••	4.92
March					1.88
April		•••		•••	2.41
May		•••			4.49
June	• • •	•••	•••	•••	5.32
July	• • •	•••	•••	•••	4.72
August		•••	•••	•••	1.38
September		• • •	• • •		3.48
October		•••	•••		4.69
November		•••	•••	•••	1.50
December	* * *	•••	•••		4.64
					44.00
					44.00

Report of the City Veterinarian

On the Work of his Department for the Year 1945

To The Medical Superintendent Officer of Health.

SIR.

I beg to submit my report on the work at the Belfast Municipal Abattoir, in connection with the Ante-mortem and Post-mortem examinations of the animals slaughtered for human food.

Table shewing the number and description of Animals slaughtered and the number condemned during the year.

	Cows	Heifers	Bulls	Bullocks	Calves	Sheep and Lambs	Goats	Pigs	Тотац
Slaught- ered	31,836	13,115	653	26,042	25,457	156,338	1,797	1,660	256,898
Con- demned	2,463	55	13	115	585	248	14	44	3,537

Table shewing amount examined and amount seized and destroyed at the Meat Inspection Station, Public Abattoir.

BEEF—Sides examined, 11; seized and destroyed, 4. Quarters examined, 9; seized and destroyed, 6. Cuts examined, 61; seized and destroyed, 30.

MUTTON—Carcases examined, 8; seized and destroyed, 3.

PORK—Carcases examined, 334; seized and destroyed, 119.

VEAL—Carcases examined, 1; seized and destroyed, 1.

FOWL—Fowl examined, 2,690; seized and destroyed, 2,690.

TINNED MEATS—Tinned Meats examined, 12,416; seized and destroyed, 12,416.

CEREALS—Packets examined, 7,696; seized and destroyed, 7,696.

DATES—Boxes examined, 35; seized and destroyed, 35.

FISH AND FOWL MARKETS.

Seized and Surrendered.

18 Barrels of Salt Herrings, 67 Boxes of Fillets, 11½ stones of Whiting, and 62 Fowl.

SERVICES RENDERED TO OTHER DEPARTMENTS.

During the year, a general supervision of the health of the animals of the several Committees of the Corporation was exercised. Several animals were purchased for the different departments.

Fortunately, the most of the work during the year was in the nature of preventive medicine, and calls for little comment.

Yours faithfully,

ALEX. McLEAN,
City Veterinarian and Manager of Abattoir.

Purdysburn Fever Hospital, Belfast

To the Medical Superintendent Officer of Health.

Dear Sir,

I beg to submit the Annual Report for the year 1945 (52 weeks ending 29th December, 1945).

1,789 cases were admitted during this period, 123 cases remained from the previous year, making 1,912 cases under treatment; 102 cases remained in hospital, so that 1,810 cases were treated to a conclusion.

The number of admissions in the previous year was 2,582; and the average number of admissions in the previous five years, 2,796.

TABLE 1 Showing the classification of cases and the mortality in cases treated to a conclusion.

Disease	Remaining on 30/12/44	Admitted during Year	Тотац	Remaining on 29/12/45	Nетт	D1ED	Mortality per cent. calculated on cases treated to a conclusion
Enteric Typhoid	1	12	13		13	1	7.69
Para A	• • • • • • • • • • • • • • • • • • • •						
Para B		4	4	•	4		
Scarlatina	83	722	805	58	747	3	0.40
Diphtheria	11	225	236	19	217	7	3.23
Cerebro-Spinal Fever -	3	40	43	1	42	2	4.76
Tuberculous Meningitis -	•••	15	15		15	14	93.33
Acute Poliomyelitis -		23	23		23	5	21.74
Pneumonia	1	7	8		8		0.00
Erysipelas		17	17		17	•••	0.00
Whooping Cough	2	34	36		36	4	11.11
Measles	15	111	126	1	125	•••	0.00
Pulmonary Tuberculosis-		26	26	20	6	2	33.3
Other Diseases	7	553	560	3	557	38	6.80
Totals	123	1,789	1,912	102	1,810	76	4.20
Comparative Nos. in 1944	249	2,582	2,831	123	2,708	47	1.74

ENTERIC FEVER.

12 cases of Enteric (B.T.) were admitted during the year.

One case remained over from the previous year, none remained at the end of this year, so that 13 cases were treated to a conclusion. There was one death from Enteric Infection. The 12 admissions all came from within the city boundary. In the previous year the admissions numbered 5. Average number of admissions for the previous five years was 11.

DIPHTHERIA.

225 cases were admitted during the year. 11 remained from the previous year and 19 remained at the end of this year, so that 217 cases were treated to a conclusion: of these, 7 died, giving a death-rate of 3.23 per cent.

The average stay in hospital of the cases which recovered was 36 days.

Of the 225 admissions, 195 came from within the city boundary, and 30 were military patients.

In the previous year the admissions numbered 188: average number of admissions for the previous five years was 528.

TABLE 2 Showing the case mortality in age periods.

Ages		Cases	DEATHS	MORTALITY PER CENT.
Under 1 year -	_	5		0.00
1— 2 years -	-	13	3	23.07
2 5 years -	-	41 .	1	2.44
5—10 years -	-	40	2	5.00
10-20 years -	-	71	1	1.41
Over 20 years -	-	47	•••	0.00
Totals	_	217	7	3.23

The incidence of clinical Diphtheria continues to fall mainly on groups from school age onwards, probably attributable to the benefits of immunization directed largely at the younger children.

LARYNGEAL DIPHTHERIA.

5 cases required operative interference for laryngeal obstruction.

All five cases were treated by intubation. Two died within twenty-four hours of admission from toxemia.

TABLE 3
Showing results in age periods in cases in which operative interference was required.

Ages		Cases	Deaths	MORTALITY PER CENT.				
Under 1 year - 1—2 years - 2—3 years - 3—4 years - 4—5 years - Over 5 years -		0 3 0 0 1 1	0 1 0 0 0 0	00.00 33.33 00.00 00.00 00.00 100.00				
Totals	_	5	2	. 40.00				

CEREBRO-SPINAL FEVER.

40 cases were admitted during the year. 3 cases remained from the previous year, and 1 remained at the end of this year, so that 42 cases were treated to a conclusion; of these, 2 died, giving a mortality of 4.76 per cent.

Of the 40 admissions, 28 were from the city and 12 were military patients.

In the previous year the admissions numbered 48: average number of admissions for the previous five years was 135.

Penicillin in very limited supply was used in the treatment of five patients, of whom one of 63 years died.

TABLE 4 Showing the case mortality in age periods.

Ages		Cases	Deaths	MORTALITY PER CENT.				
Under 1 year -	_	3		0.00				
1— 2 years -	_	3		0.00				
2— 5 years -	_	8		0.00				
5—10 years -	_	4	1	25.00				
10—20 years -	_	10		0.00				
20—30 years -	_	10	ł	0.00				
30—40 years -	_	2	l	0.00				
40—60 years -	_	1		0.00				
Over 60 years -	-	1	1	100.00				
Totals	-	42	2	4.76				

TUBERCULOUS MENINGITIS.

15 cases were admitted, and 14 treated to a conclusion during the year. One case was transferred to another hospital to die.

ACUTE POLIOMYELITIS.

23 cases were admitted and treated to a conclusion during the year. Of these, 5 died. There was no apparent relationship between any of the cases. The surviving cases were ultimately transferred to orthopædic units with residual paralysis ranging in degree, from slight to extensive.

3 cases were nursed in the Both Respirator. The only survivor of these three has very extensive paralysis.

TABLE 5 Showing case mortality and sex incidence in age periods.

Ages		Cases	S	EX	DEATHS	MORTALITY PER CENT.
AGES		CASES	M	F	DEATHS	WIORIALITY TER CENT.
Under 5 years	_	9	6	3	1	11.11
5—10 years -	-	5 ~	3	2	2	40.00
10—20 years -	-	2	2	0	0	0.00
20—30 years -	-	6	5	1	1	16.66
Over 30 years	-	1	1	0	· 1	100.00
Totals	-	23	17	6	5	21.74

The surviving patients remained in this hospital for an average of 35 days before transfer. The fatal cases died on 1st, 2nd, 6th, 6th, and 42nd days in hospital, respectively.

SCARLATINA.

722 cases were admitted, 83 remained from the previous year, 58 remained this year, so that 747 were treated to a conclusion. Of these, 3 died, giving a mortality of 0.40 per cent.

In the previous year the admissions numbered 1,611: average number of admissions for the previous five years was 1,240.

RETURN CASES.

In 8 cases the return home of a Scarlatina patient was followed by other cases of Scarlatina in the household, giving a return rate of 1.08 per cent. On the average, these 8 cases had reached the thirty-third day from onset of their disease when they were discharged.

PULMONARY TUBERCULOSIS.

Owing to the fall in numbers of the ordinary infectious diseases, a ward was made available for the reception of female patients with Tuberculosis. Of the six cases treated to a conclusion, four were discharged home and two died.

OTHER DISEASES.

The certified causes of death of the 38 fatal cases listed as Other Diseases are as follows:—

Gastro-Enteritis -	-	20	Cellulitis, Septicæmia -	1
Broncho-Pneumonia	-	3	Meningitis, Pneumococcal -	7
Brain Abscess -	-	2	,, b. Enteriditis -	3
Tetanus	-	1	,, Influenzal -	1

PENICILLIN.

During the year Penicillin was made available in sufficient quantity to treat 26 cases. These were classified as follows:—

Cerebro-Spinal Fever	-	-	-	-	-	o cases—4 recovered.
Pneumococcal Meningitis	-	-	-	-	-	8 cases—3 recovered.
Influenzal Meningitis	-	-	_	-	-	2 cases—1 recovered.
Streptococcal Meningitis	-	-	-	-	-	1 case —recovered.
Meningitis due to b. Ente	riditis	-	-	-	-	3 cases—all fatal.
Brain Abscess (no bacter	iology	y)	-	-	-	1 case —fatal.
Scarlatina and Mastoidec	tomy	_	-	-	-	1 case —recovered.
Cellulitis and Septicæmia	-	-	-	-	-	1 case —fatal.
Diphtheria—Faucial, Las	rynge	al, an	d			
Pulmonary -	-	-	-	-	-	1 case —fatal.
Axillary Adenitis -	-	-	-	-	-	1 case —recovered.
Quinsy	-	-	-	-	-	1 case —recovered.
Carbuncle	-	-	-	-	-	1 case —recovered.

INFECTIOUS CONDITIONS AMONGST THE STAFF.

4 Nurses, fully immunized, were found to be swab positive on routine swabbing on change of duties from Diphtheria wards. All cleared up quickly.

2 Nurses developed Rubella.

Yours faithfully,

F. F. KANE, Medical Superintendent.

Municipal Laboratory, Queen's University, Belfast,

30th March, 1946.

To the Medical Superintendent Officer of Health.

Dear Sir,

I beg to present herewith a summary of the work carried out at the laboratory during the year 1945.

INFECTIOUS DISEASES.

Diphtheria.		,		Pos.	NEG.	Total.
1. Swabs from Pra	actitioners	•••		93	1,263	1,356
	ospitals			1,200	2,003	3,203
	blic Health	Departmen	nts	24	238	262
	ntacts	• • •	• • •	3	46	49
5. Direct Examina 6. Virulence Tests		•••	•••	$\frac{4}{20}$	$\begin{array}{c} 212 \\ 17 \end{array}$	$\begin{array}{c} 216 \\ 37 \end{array}$
)	•••		20	17	97
Vincent's Angina.						
Swabs	•••	•••	• • •	141	275	416
Enteric Group.						
1. Agglutination F	Reactions			42	361	403
2. Fæces, Blood,			• • •	91	142	233
Food Poisoning.						
Food Stuffs		•				46
	•••	•••				10
Meningitis.						
1. Cerebro-spinal	Fluids	•••	,	21	297	318
2. Typing	•••	•••	• • •	0	2	. 2
Tuberculosis.						
1. Sputa				64	222	286
2. Pus				0	23	23
3. Urine	•••	•••	• • •	1	21	22
4. Fluids	•••	•••		0	4	4
Anthrax				0	1	1
Plague.						
Rats						480
		•••	•••			1.00
Streptococcal Infections						
Swabs for Group A	A. Typing	• • •	• • •	2	64	66
BRU	UCELLA	ABORTU	S INF	ECTIONS		
Bloods		•••		1	249	250
Milks				2	100	102
	VENE	REAL D	ISEAS	ES.		
Wassermann Reactions				259	1 899	2 021
Wassermann Reactions Wassermann Reactions		•••	•••	0	$\frac{1,822}{2}$	$2{,}081$
Films for Gonococci	(0.5.1.)			40	168	208
Kahn Reactions		•••	•••			-2,081

MILK EXAMINATIONS.

Grade A	•••			•••	• • •	3				
Grade B					• • •	3				
Grade B (Pasteurized)		•••				7				
Grade C		•••				47				
Grade C (Pasteurized)						204				
Reductase Tests						264				
Biological Tests for T	`.B.	• • •				102				
WATER EXAMINATIONS.										
Swimming Bath Wate	ers					13				
Ordinary Waters						4				
UNCLASSIFIED EXAMINATIONS.										
Urines, Pus, etc.						287				
Blood Films, Counts,		•••		• • •	•••	137				

Yours faithfully,

G. F. W. TINSDALE,

City Bacteriologist.

Maternity and Child Welfare

INFANTILE MORTALITY.

The extremely adverse weather conditions in the early weeks of the year led to a sharp increase in the incidence of respiratory infection, especially among infants, with a resulting high death rate from pneumonia and other acute respiratory conditions. During the second half of the year, however, mortality among infants was unusually low, and we were able to complete the year with an Infantile Mortality Rate of 84, a position which seemed hardly possible in the early months. Prematurity, Diarrhœa and Enteritis, and Pneumonia, Broncho-Pneumonia and Bronchitis, the rates for which are shown in Table A, headed the causes of death and accounted for 57 per cent. of the Infantile Mortality.

Table A shows the number of deaths from these conditions and the death rate per 1,000 registered births during the past ten years.

Table B shows the deaths of infants under one year and the infantile mortality rates during the past ten years, with an analysis of these deaths, and death rates according to different mortality groups.

NEO-NATAL MORTALITY.

Neo-natal mortality is deaths occurring among infants during the first four weeks of life. Prematurity was the main cause of death among these infants, and was responsible for approximately 38 per cent. of the neo-natal mortality. Infection, as well as accounting for many of the deaths due to diseases of the "Respiratory and Digestive Systems," also contributed to a considerable proportion of the deaths due to "Other Diseases peculiar to the first year of life," as cases certified "Neo-Natal Sepsis" are included in this group. The majority of these "Neo-Natal Sepsis" cases were associated with an epidemic of infection occurring among hospital cases in the early part of the year, when the respiratory infection referred to above was prevalent throughout the city.

Table C shows the Neo-Natal deaths and Neo-Natal death rates during the past ten years, with an analysis of these deaths and death rates according to different mortality groups.

MATERNAL MORTALITY.

The number of women who died from Pregnancy, Childbirth, and the Puerperal state during the year was 18, giving a Maternal Mortality Rate for the city of 1.8 per 1,000 live births. This rate is the lowest figure recorded for the city, the previous lowest being that for the year 1944, which was 2.3.

Table D shows the Maternal Mortality per 1,000 live births analysed according to the cause of death. From this table it will be seen that infection accounted for approxmiately 50 per cent. of the mortality during the year 1945.

TABLE A

Showing the number of Deaths of Infants under one year from Prematurity, Diarrhæa and Enteritis, Pneumonia, Broncho-Pneumonia, and Bronchitis.

45	Rate per 1,000 Births	15.73	16.85	15.63
1945	Deaths	155	166	154
4+	Rate per 1,000 Births	20.18	17.02	16.35
1944	Deaths	211	178	171
43	Rate per 1,000 Births	22.40	26.79	23.06
1943	Deaths	240	287	247
42	Rate per 1,000 Ehrths	19.36	16.05	19.46
1942	Dearhs	187	155	
41	Rate per 1,000 Births	18.96	20.64	15.15
1941	Deaths	159	173	127
1940	Rate per 1,000 Births	22.29	29.53	21.71
19.	Deaths	194	257	189
1939	Rate per 1,000 Births	16.62	18.96	15.39
19	Deaths	149	170	138
1938	Rate per 1,000 Births	18.26	13.99	17.71
19	Deaths	167	128	162
37	Rate per 1,000 Births	22.40	163 17.81	17.59
1937	Deaths	205	163	161
1936	Rate per 1,000 Births	25.32	22.07	17.20
19	Deaths	234	204	159
		Prematurity	Diarrhœa and Enteritis -	Pneumonia, Broncho-Pneumonia - and Bronchitis

TABLE B

Showing the Deaths of Infants under one year and the Infantile Mortality Rates during the ten years 1936—1945, with an analysis of these deaths and death rates according to Mortality Groups.

ner ises	Rate	2.92	3.06	3.50	2.89	5.40	5.01	3.20	3.08	2.20	2.84
Other	Deaths	27	28	32	26	47	45	31	33	23	28
ner ases iar to ïrst f Life	Rate	3.35	2.84	3.72	2.57	3.91	2.51	2.38	5.41	8.61	9.24
Other Diseases peculiar to the First Year of Life	Deaths	31	26	34	23	34	21	23	58	06	91
Injury at Birth	Rate	2.06	3.50	2.19	1.34	2.53	1.79	2.59	2.42	2.01	2.03
Injur	Deaths	19	32	20	12	22	15	25	26	21	20
Premature Birth	Rate	25.32	22.40	18.26	16.62	22.29	18.96	19.36	22.40	20.18	15.73
Prem	Deaths	234	205	167	149	194	159	187	240	211	155
Congenital Debility	Rate	7.03	7.21	7.11	8.70	11.95	8.71	11.08	6.81	5.26	4.36
Cong	Deaths	9	99	9	78	104	73	107	73	55	43
ngenital Ilforma- tions	Rate	6.71	7.65	9.84	08.9	7.35	7.39	8.80	7.84	6.41	6.50
Congenital Malforma- tions	Deaths	62	70	06	61	64	62	85	84	29	64
Diseases of the Digestive System	Rate	23.70	19.24	15.53	20.19	30.91	22.06	17.08	28.00	18.27	17.96
Disease of the Digestiv System	Deaths	219	176	142	181	269	185	165	300	191	177
Diseases of the Respiratory System	Rate	18.18	19.13	19.24	16.51	22.86	15.63	19.88	23.80	16.64	16.14
Disease of the Respirato System	Deaths	168	175	176	148	199	131	192	255	174	159
ses of ervous tem	Rate	4.44	4.70	4.15	4.68	2.99	3.94	3.83	3.64	4.02	3.35
Diseases of the Nervous System	Deaths	4	43	38	42	26	33	37	39	42	33
nfective & Parasitic Diseases	Rate	7.26	4.26	12.68	4.68	12.18	4.53	3.31	7.56	5.07	5.89
Infective & Parasitic Diseases	Deaths	29	39	116	42	106	38	32	81	53	58
Infantile Mortality Rate		101	94	96	85	122	91	92	111	68	84
Deaths under One Year		933	098	880	762	1,065	759	884	1,189	927	828
Віктнѕ		9,242	9,150	9,146	996'8	8,704	8,383	659,6	10,713	10,456	9,853
YEAR		1936	1937	1938	1939	1940	1941	1942	1943	1944	1945

TABLE C

Showing the Neo-Natal Deaths and Neo-Natal Death Rate during ten years 1936—1945, with an analysis of these deaths and death rates according to Mortality Groups.

1											
Other Causes	Rate	2.60	1.31	1.97	1.90	2.64	2.86	1.76	3.17	2.68	2.44
<u> </u>	Deaths	24	12	18	17	23	24	17	34	28	24
Other Diseases peculiar to the First Year of Life	Rate	3.25	2.62	3.28	2.57	3.68	2.51	2.17	4.95	7.56	8.83
Ot Disc pecul the Year o	Deaths	30	24	30	23	32	21	21	53	62	87
cy at	Rate	2.05	5.17	2.19	1.34	2.53	1.67	2.17	2.42	2.01	1.82
Injury	Deaths	19	29	20	12	22	14	21	26	21	18
Premature Birth	Rate	23.37	21.20	16.95	15.06	20.79	16.82	18.64	21.09	18.94	15.02
Prem	Deaths	216	194	155	135	181	141	180	226	861	148
enital Ility	Rate	4.97	4.26	4.37	5.91	3.10	2.98	3.21	3.55	2.49	1.32
Congenital Debility	Deaths	46	39	40	53	27	25	31	38	26	13
nital rma- ns	Rate	4.65	4.59	6.01	3.57	3.68	4.53	5.49	5.32	4.97	4.06
Congenital Malforma- tions	Deaths	43	42	55	32	32	38	53	57	52	- 9+
ases the stive em	Rate	1.51	1.53	0.55	1.45	1.72	2.15	5.69	11.01	4.88	2.23
Diseases of the Digestive System	Deaths	41	4	1	13	15	18	26	118	51	22
ases he atory em	Rate	1.62	2.40	1.75	1.67	2.07	2.62	4.04	6.72	4.78	3.96
Diseases of the Respiratory System	Deaths	15	22	16	15	18	22	39	72	20	39
Neo-Natal Rate		44.04	41.09	37.06	33.46	40.21	36.14	40.17	58.25	48.30	39.68
Deaths under FourWecks		407	376	339	300	350	303	388	624	205	391
Віктнѕ		9,242	9,150	9,146	996,8	8,704	8,383	659'6	10,713	10,456	9,853
YEAR		1936	1937	1938	1939	1940	1941	1942	1943	1944	1945

TABLE D

Shewing the Maternal Mortality Rate per 1,000 live births analysed according to the cause of death.

Cause of Death			No. of Deaths	Rate	per 1,000 Live Births
Post-Abortion Infection	-	-	4		0.41
Abortions (not Septic)	-	-	1		0.10
Ectopic Gestation -	-	-	1		0.10
Hæmorrhage of Pregnancy	-	-	0		0.00
Toxæmia of Pregnancy	-	-	3		0.30
Other Diseases and Accident	s of		0		0.00
Pregnancy -	-	-	0	•••	0.00
Hæmorrhage of Childbirth,	etc.	-	1		0.10
Infection during Childbirth	and the				
Puerperium -	-	-	5		0.51
Puerperal Toxæmia -	-	-	0		0.00
Other Accidents of Childbir	rth	-	3		0.30
Other Conditions of Childb Puerperal State -	irth and -	-	0		0.00

TABLE E

Shewing the Deaths of Children under one year old per 1,000 births each year from 1926—1945.

YEAR		Deaths per 1,000 Births	YEAR		Deaths per 1,000 Births
-1926	 	112	1936	 	101
1927	 	101	1937 $^{\circ}$	 	94
1928	 	103	1938	 	96
1929	 	112	1939	 	85
1930	 	7 8	1940	 	122
1931	 	90	1941	 	91
1932	 	111	1942	 	92
1933	 	102	1943	 	111
1934	 	80	1944	 	89
1935	 	112	1945	 	84

*MIDWIVES

During the year 236 midwives gave the required notice of their intention to practise; of these, 233 were certified by examination and 3 otherwise certified.

During the year the services of Medical Practitioners were requisitioned by midwives in 196 emergency cases, and the Belfast Corporation, as the Local Supervising Authority, paid in fees £246. 12s. 6d. for attendances in 103 cases.

Notifications received by Medical Superintendent Officer of Health:-

Under	Form	A.—Sending for Medical help	196
7 ,	, ,	B.—Notification of Death	19
~ ,,	,,	C.—Notification of Still-birth	362
, ,	, ,	D.—Notification of having laid out a Dead Body	1
, ,	, ,	E.—Source of Infection	3
		F —Artificial Feeding	54

NOTIFICATION OF BIRTHS ACT

11,307 births were notified pursuant to the Notification of Births Act, and in addition, 20 were either discovered by Health Visitors or notified by the Registrars of Births, making a total of 11,327; of these, 5,866 were males, 5,460 were females, and 1 sex undetermined; 362 were still-births and 582 were illegitimate births.

Of the total number notified, 8,102 were selected for visitation and supervision, and during the year 58,394 visits were made.

Births:-

Attended	by Medical Practitioners and Midw	rives		2,272
, ,	only by Midwives certified by exan	nination		2,137
, ,	only by Dispensary Midwives			613
, ,	by Midwives otherwise certified			20
, ,	in Jubilee Maternity Hospital			1,655
1 1	in Royal Maternity Hospital		• • •	1,586
, ,	in Johnstone House			286
, ,	in other Maternity Hospitals			83
, ,	by Nurses from Maternity Hospita	ls		404
, ,	in Malone Place Home			364
1.5	in Thorndale Home			313
, ,	in Nursing Homes	• • •		1,591
, ,	No Information		•••	3

5 cases of Ophthalmia Neonatorum occurred during the year

434 cases of Inflammation of Eyes were visited during the year in children under one year.

27 cases of Puerperal Pyrexia occurred during the year; of these, one died.

ANTE-NATAL REPORTS FOR THE YEAR 1945

THE ROYAL MATERNITY HOSPITAL

Total number of	new pati	ents				2,561
Total number of	re-attend	lances		•••		12,304
<i>—</i>	,		T.	4		
I HE U	LSTER I	Hospital	, I EMPL	EMORE A	VENUE	
New cases in Ou	t-patient	Departme	nt			175
Return cases in (Out-patie	nt Depart	tment			548
	M	ALONE PL	ACE Ho	ME		
New Patients						393
Re-attendances			,			1,951
		-				
	N	Iunicipal	CLINICS			
New Patients			• • •	• • •		2,428
Re-attendances			• • •			9,264

Thorndale House, Duncairn Avenue (The Salvation Army), and The Belfast Midnight Mission and Rescue and Maternity Home, 31 Malone Place.

The above Homes, which receive grants from the Belfast Corporation, carried out their work during the year in a satisfactory manner.

The following shows the number of confinements which took place during the year in Thorndale House and Malone Place Home:—

Thorndale House			Total		City Cases		Outside City Cases
Number of Confinements (married mothers)	-	-	256		244	•••	12
Number of Confinements (unmarried mothers)	-	-	61	• ; •	12	•••	49
MALONE PLACE HOME							
Number of Confinements (married mothers)	-	-	209		202	•••	7
Number of Confinements (unmarried mothers)	-	-	144	•••	63		81

MATERNITY AND CHILD WELFARE CENTRES

The following table shews the number of names on the roll of each Centre and the total number of attendances during the year, also the number of babies medically examined and the total number of examinations:—

		On Roll	Total No. of attendances by mothers	Babies medically examined	Total examinations of babies
Danube Street		283	2,995	423	1,012
Donegall Road (two	o sessions)	608	5,654	782	1,696
Dee Street		319	2,710	396	999
York Street		413	3,111	456	905
Spiers Place (two	sessions,				
Thursday and Fr	iday)	584	5,017	803	1,762
Falls Road		504	2,860	447	1,187
Havelock Place		354	3,288	510	980
Woodstock (Wedne	esday)	37 8	3,162	422	824
Woodstock (Friday)	436	4,143	424	1,002
Ligoniel	• • • •	211 .	2,180	* 318	685
Mervue Street		373	3,269	393	1,130
Avoca Street		419	4,689	632	1,336
Divis Street		456	3,508	825	1,504
Sydenham		284	2,672	294	720
Glenard		406	3,299	490	1,223
Bloomfield		333	3,293	430	856
Greencastle		171	1,761	96	546
Susan Street		363	3,199	463	973
Seaview		220	2,434	467	879
Joanmount		218	2,030	322	579
Kimberley Street		274	2,593	482	970
Spiers Place (Tueso	day)	308	3,299	507	1,086
		7,915	71,166	10,382	${22,854}$

HOME HELP SCHEME.

This scheme worked very successfully during the year. The average number of Home Helps on the panel was 35, and a total of 405 cases were dealt with. The majority of these were confinement cases, but mothers of small children who were unable to carry on their household duties during periods of acute illness were also assisted.

TREATMENT OF SQUINT.

91 children were referred for examination by an ophthalmic surgeon and subsequently provided with glasses.

OTHER SCHEMES.

Other schemes in operation during the year were: Home nursing of Gastro-Enteritis and Broncho-Pneumonia in children under two years old, by arrangement with the District Nursing Society. Dental treatment for expectant mothers and toddlers, by arrangement with the Royal Victoria Hospital: Provision of meals for expectant mothers and their toddlers, by arrangement with the Education Department: Services of an Obstetrical Flying Squad in cases of hæmorrhage and obstetric shock, by arrangement with the Royal Maternity and Jubilee Hospitals.

During the year demonstrations in the preparation of meals suitable for young children were again arranged at the various centres, in conjunction with the Ministry of Food. Films on suitable topics were also displayed by the Ministry of Information. To both these Ministries we are indebted for their kind co-operation.

The Belfast Voluntary Workers' Association continued to render valuable service, both in connection with the clerical and social aspects of the work at our centres. We again take the opportunity of recording our appreciation of this most helpful assistance.

Report of the Chief Tuberculosis Officer

SUBMITTED TO

The Medical Superintendent Officer of Health

FOR

The Belfast Corporation Tuberculosis Committee

Dear Sir,

I have pleasure in forwarding the various sections of the Annual Report of the Tuberculosis Service.

In accordance with the wishes of the Belfast Corporation Tuberculosis Committee, strenuous efforts have been made to provide additional accommodation, which is urgently required for tuberculous patients. The number of patients in institutions for which your Authority is responsible has increased from 446 on 1st January, 1945, to 526 on 31st December, 1945. Further increases have been planned, and it is anticipated that more than six hundred beds for tuberculous patients will be available at the end of 1946. The actual number of available beds has increased from 323 in December, 1939, to 498 beds in December, 1945 (excluding beds in the Belfast City Hospital).

In spite of the increased accommodation, there has been a serious lengthening of the waiting-list, which now exceeds four hundred. Some of the causes of this long waiting-list may be mentioned. There is a general tendency for patients to seek hospital treatment, owing to the difficulties of home nursing under war-time conditions. The facilities for treatment in the hospitals under your control are such as to attract an increased number of patients, and the average length of stay in hospital has tended to increase. Also, the public is becoming very conscious of the dangers of tuberculosis and of the importance of early treatment. Mass Radiography is another means of swelling the waiting-list, by disclosing cases of active tuberculosis which would otherwise have remained unsuspected for many months. Perhaps the most important single factor is the provision of Treatment Allowances under Memorandum 266 T, which has encouraged and enabled many patients to stop work without delay and avail themselves of hospital treatment.

The report of the Senior Tuberculosis Officer shows a substantial increase in the work done at the Central Tuberculosis Institute. It is clear from the large number of new patients examined, a high proportion of whom fortunately prove to be non-tuberculous, that the work of the Institute has the confidence of the medical profession and of the citizens.

The first Annual Report of the Director of the Mass Radiography Unit is of the greatest interest. This work has already been valuable in disclosing unsuspected tuberculosis and in providing a great mass of exact information as to the health of persons in employment.

The Municipal Sanatorium, Whiteabbey, and the Children's Hospital, Greenisland, have been filled to capacity throughout the year.

On 1st July, 1945, the Belfast Corporation Tuberculosis Committee took over control from the Commissioners for Tuberculosis. I wish to express my thanks to the Commissioners and to the members of the Committee for their courteous consideration and unfailing encouragement in the work of the Department.

Yours faithfully,

B. R. CLARKE,

Chief Tuberculosis Officer.

Report of the Senior Tuberculosis Officer

on the work of

The Tuberculosis Institute

For the Year ended 31st December, 1945

To the Chief Tuberculosis Officer.

Dear Sir,

I have pleasure in presenting for your information my annual report on the work of the Institute for the year ended 31st December, 1945—the thirtieth Report since the scheme of the Belfast Corporation for the prevention and treatment of tuberculosis was inaugurated in April, 1914.

During the year we examined 4,162 new patients—the largest number of new patients examined in any year since the commencement of our work.

NEW EXAMINATIONS.

TABLE I

Shows the number of patients examined for the first time, in each of the years indicated, without regard to age, sex, or diagnosis.

YEAR ENDED	YEAR ENDED								
31st December, 1940	-	_		2006					
31st December, 1941	-	-	-	1765					
31st December, 1942	_	_	- 1	2822					
31st December, 1943	-	-	- /	3290					
31st December, 1944	_	_		3399					
31st December, 1945	_	_	_	4162					

The number of primary examinations made from the date of the opening of the Institutes in April, 1914, was 67,562.

TABLE II

Shows the diagnostic result of examination of new patients during the years indicated.

YEAR ENDED	Tuberculous	Primary T.B. Complex	Non- Tuberculous	Diagnosis Not Completed	Total
31/12/40	655	175	1114	197	2006
31/12/41	501	160	919	185	1765
31/12/42	627	276	1671	248	2822
31/12/43	628	250	2151	261	3290
31/12/44	762	186	2202	249	3399
31/12/45	724	246	2784	408	4162
Percentages for Year ended 31/12/45	17.4%	5.7%	67.1%	9.8%	100%

CONTACTS.

TABLE III

Shows the result of the examination of "Contacts" during the year 1945.

	Nor Diagnosed Total	Over 15	31 693	2 262	72	32	38 992
	Nor Di	Under 15	18	∞	÷	:	26
	ERCULOUS	Over 15	262	110	:	19	391
DIAGNOSIS	Non-Tuberculous	Under 15 Over 15	260	116	:	m	379
DIAG	PRIMARY T.B. COMPLEX	Under 15 Over 15	:	:	:	:	÷
	PRIMARY T.	Under 15	102	19	:	10	126
	TUBERCULOUS	Under 15 Over 15	. 17	7	:	72	29
	TUBER	Under 15	23	:	:	÷	33
	Contacts of—		Pulmonary Cases with Positive Sputum	Pulmonary Cases with NEGATIVE Sputum -	Non-Pulmonary Cases -	DECEASED Patients previously unknown to us -	Totals

Of the new patients examined during the year, 3,170 were notified as suffering, or suspected to be suffering, from tuberculosis; and 992, as shown above, were "contacts." Contacts are examined in exactly the same way as new patients, i.e., clinical examination, X-ray, and (if the examinee is a child) tuberculin test. It is to be noted that although the number of new patients examined is the largest on record, the percentage found to be suffering from tuberculosis is the lowest.

FORMS OF TUBERCULOSIS.

TABLE IV

Shows the numbers and sex of the patients found to be suffering from the different forms of Tuberculosis.

YEAR ENDED	Pulm	onary	Glan	dular	Osse	eous	Abdo	minal	Other	Forms	To	OTAL
	M	F	M	F	M	F	M	F	M	F	M	F
31/12/40	298	247	15	16	28	14	13	10	8	6	362	295
31/12/41	271	165	13	10	7	5	8	13	7	2	306	195
31/12/42	276	266	14	17	14	14	8	13	2	3	314	313
31/12/43	300	261	11	15	7	10	12	7	1	4	330	298
31/12/44	348	321	10	12	17	9	14	15	7	9	396	366
31/12/45	374	313	9	7	16	11	12	10	6	4	417	345

RE-ATTENDANCES AND RE-EXAMINATIONS.

The number of re-attendances of "old" patients for examination and treatment at the Institute during the year was 14,462. In addition, 5,721 special re-examinations were carried out. 203 patients unable to attend at the Institute, were re-examined in their homes or in hospitals, by the medical staff of the Institutes. This was exclusive of attendances of patients in their homes by Panel and Domiciliary Doctors, acting under the Scheme of the Council.

PATIENTS ON THE VARIOUS FORMS OF TREATMENT. TABLE V

Shows the numbers of definitely tuberculous patients on the different forms of treatment at 31st December, 1945.

INSTITUTE	Doміс	CILIARY	1					
Institute	Insured Non- Insured		Mun. San. Children's Minnow- W'abbey Hospital burn Hosp			M.O.H. Bel. Cir Em. Hosp. Hospit		Тотац
634	1893	417	307	46	20	103	50	3470

The above figures are exclusive of 376 patients not definitely diagnosed at the end of the year, but under observation on one or other form of treatment, and also of a number of cases of Primary T.B. Complex in children.

The total definitely tuberculous patients treated during the year numbered 4,374.

TABLE VI NEW CASES AND DEATHS IN AGE-PERIODS.

Shows the numbers of New Cases and of Deaths amongst males and females in the Age-periods set out.

			New	Cases	Deaths					
Age-Periods				of Tuber- osis	Pulmonary Mili	(including ary)	Non- Pulmonary			
			Males	Females	Males	Females	Males	Females		
0— 4 inclusive	_	_	9	9	4	4	23	14		
5— 9 "	-	-	9	9			4	3		
10—14 ,,	-	-	8	17	2		2	4		
15—19 "	-	-	38	76	14	18	2	1		
20—24 ,,	-	-	77	73	18	33	2	2		
25—34 "	-	-	106	97	19	51	. 4	4		
35—44 "	-	-	73	47	32	21	2	2		
45—54 "	-	-	62	10	43	14	1	4		
55—64 "	-	-	28	4	21	9	2	1		
65 and upwards	-		7	3	11	12	1	2		
Totals	-	-	417	345	164	162	43	37		

During the year 1945—

- 9,819 X-ray films were taken, and screenings as required carried out.
 - 912 Tuberculin tests were done. The total number of children tested by this method to the end of 1945 was 10,293.
- 2,913 Artificial Pneumothorax Refills were given.
 - 84 Dental Examinations and Treatments.

DEATHS AND DEATH RATES.

Pulmonary Tuberculosis.—The number of deaths in Belfast in 1945, according to the return of the Registrar General for Northern Ireland, was 326, as compared with 354 in 1944, and 836 in 1914. The death-rate from pulmonary tuberculosis in 1945 was 74 per 100,000.

Non-pulmonary Tuberculosis.—The number of deaths from the non-pulmonary forms of tuberculosis in 1945 was 80, as compared with 89 in 1944, and 290 in the year 1914. The death-rate from non-pulmonary tuberculosis in 1945 was 18 per 100.000.

TABLE VII

Shows the declining trend of the death-rate from tuberculosis in Belfast during the last thirty-two years.

	YE	AR		No. of	Deaths		н Rате 100,000		ON OF RATE 014 AS 100
				Pul.	Non-Pul.	Pul.	Non-Pul.	Pul.	Non-Pul.
1914		_	-	836	290	209	73	100	100
1915	-	_	- 1	770	286	191	71	91	97
1916	-	_	- /	792	259	203	. 66	97	90
1917	-	_	- /	912	289	232	73	111	100
1918	_	_	-	992	265	252	67	121	92
1919	-	_	- 1	867	261	216	65	103	89
1920	_	_	-	783	225	189	54	90	74
1921	-	_	- 1	624	163	148	39	71	53
1922	_	_	- 1	534	158	126	37	60	51
1923	-	_	_	528	159	123	37	59	51
1924	_	_	- 4	615	166	142	38	68	52
1925	-	_	-	571	202	130	46	62	63
1926	_	_	_	582	141	140	34	67	47
1927	_	_	-	509	152	123	36	58	49
1928	-	_	-	493	147	119	35	57	48
1929	-	_	-	475	122	114	29	54	40
1930	-	_	-	469	129	113	31	54	42
1931	-	_	-	438	124	105	30	50	41
1932	-	-	_ }	427	128	103	31	49	42
1933	_	_	_	450	159	108	38	52	52
1934	-	_	-	448	122	108	29	52	40
1935	-	-	_	401	108	96	26	46	37
1936	-	_	-	406	94	97	22	46	30
1937	-	-	-	414	96	94	22	45	30
1938		-	-	348	107	78	24	42	37
1939	-	-	_	365	71	83	16	39	22
1940	-	_	_	412	94	94	21	45	28
1941	_	_	_	426	98	97	22	46	30
1942	_	-	-	369	79	84	18	40	25
1943	_	-	-0	367	117	84	27	40	37
1944	-	-	_	354	89	81	20	40	27
1945	_	_		326	80	74	18	35	25

From the foregoing table it will be seen that for every 100 persons who died of pulmonary tuberculosis in Belfast in 1914, 35 died in 1945—a reduction in the death-rate of 65 per cent.; while for every 100 persons who died of non-pulmonary tuberculosis in 1914, 25 died in 1945—a reduction in the death-rate of 75 per cent. in the same period.

51

In the year 1914 the Belfast City Council inaugurated the Scheme for the Prevention and Treatment of Tuberculosis in 91 King Street—an old dwelling-house converted in earlier years into an Extern for the Forster Green Hospital, by their Administrative Board. In the same year a Branch Institute was opened at 225 Albert-bridge Road—an old vicarage which the Council purchased and adapted. In 1918 a new building in Durham Street was opened as the present Central Tuberculosis Institute. Owing to the 1914-18 war, the original plans of this building were not followed, and the Institute has not yet been completed. In 1945 the Branch Institute at 225 Albertbridge Road was converted into the present Mass Radiography Centre, and all the work of the Branch was transferred to the already overcrowded building in Durham Street.

On the outbreak of the World War in 1939, both the Central and Branch Institutes were kept open day and night as First-Aid Posts by the staffs of the Institutes tor over two months. Later some voluntary workers were recruited, and for the greater part of the remainder of the war, the Institutes were maintained as "second-line" First-Aid Posts.

Since 1940 (with the exception of the year 1941, when we had the few air-raids experienced by this city) the numbers of new examinations have steadily increased—from 2,006 in 1940 to 4,162 in 1945. Examinations and re-examinations have thus become a major problem, considering our limited accommodation. In addition, increasing numbers are now being referred to us by the Mass Radiography Centre. Contrary to the general belief, we find little or no reluctance on the part of patients to come to the Institute for examination; and the medical practitioners of the city have shown an increasing readiness to avail themselves of the facilities for examination provided at the Institute. This is indicated by the ever-increasing percentage of new examinees found to be non-tuberculous. In other words, the percentage of new examinees found to be suffering from tubercular disease has fallen from 50 per cent. in 1935 to 18 per cent. in 1945.

About 50 per cent. of the patients suffering from tuberculosis give a family history of the disease. Amongst 992 "contacts" examined during the year, 32 (about 3 per cent.) were found to be suffering from tuberculosis. It would be unsafe to take this percentage as representing the results of examination of "contacts" in the long run, since the general experience is that about one-fifth of the "contacts" of tuberculous patients develop tuberculosis. It is our hope that in the future we may have an X-ray machine (with suitable staff and accommodation) for taking 5 in. by 4 in. films for the six-monthly re-examination of "contacts," for, as I have pointed out before, pulmonary tuberculosis is a disease in which an early diagnosis can only be made by radiography.

We have at present on our register one thousand patients who have, or have had, tubercle bacilli in their sputum. It is to be hoped that, in the near future, suitable homes, where at least partial isolation may be possible, will be made available for such patients and their families. The fact that half of our tuberculous patients have no known (or admitted) family history should not be lost sight of: if these histories are accepted as correct, the infecting agent must be outside the family. In this connection it is regrettable that, up to the present, hostels have not been provided for selected tuberculous patients, a number of whom would, without doubt, avail themselves of the accommodation—to their own comfort and to the advantage of those with whom they are living in contact.

Under the authority of the White Paper (Memorandum 266T.), Treatment Allowances were granted during the year to 449 eligible patients. Within the scope of these allowances, they have been found of very great benefit to patients and their families. At the same time, they have thrown a very large amount of additional work on the staff of the Institute.

I am,

Yours faithfully,

JAMES SHAW,

Senior Tubérculosis Officer.

PULMONARY TUBERCULOSIS

Return showing the immediate results of treatment of definitely tuberculous patients discharged during the year 1945 from Institutions approved for the treatment of Tuberculosis.

Ministry of Health Emergency Hospital, Musgrave Park.

Admitted in 1945: 99 adult males, 54 adult females; total admissions 153.

•		DURATION	DURATION OF RESIDENTIAL TREATMENT IN THE INSTITUTION							
Classification upon Admission	Condition upon Discharge	Under 3 Months	3—6 Months	6—12 Months	Over 1 Year	Totals	Grand Totals			
Class T.B. Minus	Quiescent Not quiescent Died in Instn.	M W C 2 7	M W C 8 1 — 3 — —	M W C 5 2 — 2 — —	M W C	M W C 15 3 — 12 — —	18 12 —			
Class T.B. Plus Group 1	Quiescent Not quiescent Died in Instn.	_ 1 _	2 — — 1 1 — — — —			2 — — 1 2 — — —	2 3			
Class T.B. Plus Group 2	Quiescent Not quiescent Died in Instn.	3 2 -		<u> </u>		2 — — 3 2 —	2 5 —			
Class T.B. Plus Group 3	Quiescent Not quiescent Died in Instn.		<u></u>				7			
Totals (Pulmo	nary)	18 , 6 —	15 3 —	12 2 —		45 11 —	56			

(Signed) W. A. Brown, Medical Superintendent.

NON-PULMONARY TUBERCULOSIS

Return showing the immediate results of treatment of definitely tuberculous patients discharged during the year 1945 from Institutions approved for the treatment of Tuberculosis.

Ministry of Health Emergency Hospital, Musgrave Park, Belfast.

Admitted: 4 male and 9 female adults.

		D	DURATION OF RESIDENTIAL TREATMENT IN THE INSTITUTION								V						
Classification upon Admission	Condition upon Discharge		nde: 3 onth			3—6 Ionth			—12 onth			Over 1 Year		T	OTAL	s	GRAND TOTALS
Bones and Joints	Quiescent Not quiescent Died in Instn.	M.	W _ _ _	C 	 	W - 1 -	C 	M 2 -	W 1 —	.C 		W - - -	C 	M 2 1 —	W 1 1	C -	3 2
Abdominal	Quiescent Not quiescent Died in Instn.		<u>2</u> _	_		_	_	_		=		_	=		2		2
Other Organs	Quiescent Not quiescent Died in Instn.		=	=	_			_		_			=	=		<u>·</u>	
Peripheral Glands	Quiescent Not quiescent Died in Instn.	_	1		_	=	_	·	<u>-</u>		_	_	_	=	1		1 —
Totals (Non-pr	ulmonary) -	1	3			1	_	2	1	_	_	_		3	5	_	8

(Signed) W. A. Brown, Medical Superintendent.

PULMONARY TUBERCULOSIS

Return showing the immediate results of treatment of definitely tuberculous patients discharged during the year 1945 from Institutions approved for the treatment of Tuberculosis.

Minnowburn Chest Hospital.

Admitted in 1945: 26 adult females.

		D	DURATION OF RESIDENTIAL TREATMENT IN THE INSTITUTION •														
Classification upon Admission	Condition upon Discharge		Jnder 3 Ionth			3—6 Iontl			—12 onth			Over 1 Year		Т	OTAL	.s	Grand Totals
Class T.B. Minus	Quiescent Not quiescent Died in Instn.	M _ _	W *1 —	C _ _	M _ _	W - -		M _ _	W _ _	.C 	M 		C _ _	M _ _	*1 _	C _ _	1
Class T.B. Plus Group 1	Quiescent Not quiescent Died in Instn.			=		_			_	=	_	=	_	_	=	_	=
Class T.B. Plus Group 2	Quiescent Not quiescent Died in Instn.		1				_		_	=	_	_			1 - -	<u>-</u> 	. 1
Class T.B. Plus Group 3	Quiescent Not quiescent Died in Instn.			=		_	_ 	_	_	=	<u>-</u>	<u>-</u>				_	2 2
Totals (Pulmo (Non-p	nary) oulmonary) -	-	5 1	_		_			_	=		_	_		5	_	5

^{*}Non-pulmonary.

(Signed) F. F. KANE, Medical Superintendent.

Report of the Medical Director

ON THE

Work of the Mass Radiography Centre For the Year ended 31st December, 1945

To The Chief Tuberculosis Officer.

Dear Sir,

I have the honour to present to you the first Annual Report of the Mass

Radiography Centre for the year ended 31st December, 1945.

The Mass Radiography Centre at 225 Albertbridge Road was officially opened on the 11th June, 1945, by the Right Honourable William Grant, M.P., Minister of Health and Local Government.

Routine work commenced on the 12th June, 1945, and during the six and a half

months ended 31st December, 1945, 16,275 examinees attended the Unit.

Prior to this the staff attended a specialised training course at the British Ministry

of Health Mass Radiography Centre in London.

The staff consists of a Medical Director, an Assistant (part-time) to the Medical Director, an Organising Secretary, a Senior Radiographer, two Assistant Radiographers, a Secretary to the Medical Director, four Clerks, and a Caretaker.

The Mass Radiography Scheme in Belfast operates along similar lines to those recommended in the report by the Medical Research Council (London) on Mass Miniature Radiography of Civilians (Special Report Series, No. 251), and is applied

to workers and residents within the County Borough of Belfast.

In the first instance the examination was applied to workers, etc., already organised in groups, e.g., employees in large industrial concerns and staff of Government offices, university students, etc. Shortly after the scheme was launched, many requests were received from individuals not included in the above groups. Arrangements were therefore made by means of advertisements in the local press to make the examination available to all sections of the community over 14 years of age. The response to the first advertisement was so encouraging, over two thousand applications being received, that it is proposed to continue this method of organising individuals into large groups.

The examination is conducted either at the Mass Radiography Centre or on factory premises where the number employed is in the region of three thousand. During the period under review the Unit has operated in one large factory. Here the management kindly consented to allow employees of neighbouring works to be

examined while the Unit was installed in their premises.

While the examination is an entirely voluntary one, the response depends mainly on intensive propaganda. Propaganda has been carried out by means of cinema shows, posters, and individual volunteer leaflets which explain the nature of the examination. In addition, talks are arranged on the factory premises, when the scheme is explained, the object of the examination fully discussed, and an opportunity to have queries answered is given. In the early months propaganda was carried out by the Medical Director and a part-time Organising Secretary. It was soon realised that a full-time Organising Secretary was necessary, and Mr. W. Jenkins of the Public Health Department carried on the work temporarily pending the appointment of a full-time Secretary. Mr. W. Orr was appointed to this post on the 1st January, 1946.

At first the response in Belfast was similar to that first obtained in Mass Radiography Units working in England, being in the region of 61 per cent. Gradually the percentage of volunteers increased, and towards the end of the year it was in the region of 90 per cent, one small factory actually producing a 100 per cent, response

of 90 per cent., one small factory actually producing a 100 per cent. response. It will be seen from Tables II and III below that the large majority of volunteers completed the examination. Only 30 out of 1,103 refused to attend for large film investigation, and only 7 out of 613 for clinical examination. In one instance only did an examinee who was subsequently diagnosed as suffering from active pulmonary tuberculosis refuse to co-operate.

The task of the Medical Director in persuading patients suffering from pulmonary tuberculosis to cease work has been made easier by the introduction of Treatment

Allowances under Memorandum 266T.

I give below, in Tables I to IX, the result of the examination of 16,275 individuals.

TABLE I

Miniature Radiography Examinations.

	Male	Female	Total
Total number examined by Miniature Radiography	7,911	8,364	16,275

TABLE II
Large Film Investigations.

	Male	Female	Total
Number recalled for large film examination	570	533	1,103
Percentage of examinees required to attend for large film examination -	7.2	6.4	6.8
Number who did not attend -	16	14	30
Number examined by large film -	554	519	1,073

TABLE III
Clinical Investigations.

	Male	Female	Total
Number recalled for clinical examination	301	312	613
Percentage of examinees recalled for clinical examination following large film examination	3.8	3.7	3.8
*Number who did not attend -	3	4	7
Number clinically examined -	298	308	606

^{*}Six of the seven examinees who did not attend for clinical examination were classified on the large film examination. The one unclassified was in the 15-24 (female) age group.

TABLE IV

Age Groups of Examinees

(excluding thirty who did not attend for large film examination and one who was not classified).

	14 Years	15-24	25-34	35-44	45-59	60 & over	Total
Male -	129	2,664	1,684	1,545	1,664	209	7,895
Female -	279	5,007	1,774	843	417	29	8,349
Both sexes	408	7,671	3,458	2,388	2,081	238	16,244

TABLE V

Cases diagnosed Pulmonary Tuberculosis (Post Primary).

				Active	Inactive	Тотац
Male	-	-	-	58	184	242
Female	-	-	-	66	130	196
Both sexes	-	-	-	124*	314	438

^{37 (7} active and 30 inactive) of the total number had been previously diagnosed. *Of the 124 active cases, 49 (or 39.5%) were found to have tubercle bacilli in their sputum.

TABLE VI

Ultimate Disposal of 124 Cases diagnosed Active Pulmonary Tuberculosis (Post Primary).

	Sanatorium	Observation*	Referred to Doctor	No Action
Male	38	18	2	
Female	40	23	2	1‡
				}
Both sexes -	78†	41	4	1

^{*}Observation at Central Tuberculosis Institute or Mass Radiography Centre.

TABLE VII

Ultimate Disposal of 314 Cases diagnosed Inactive Pulmonary Tuberculosis (Post Primary).

	Observation*	Referred to Doctor	No Action
Male	56	39	89
Female	58	22	50
Both sexes -	114	61	139

^{*}Observation at Central Tuberculosis Institute or Mass Radiography Centre.

[†]Of the total number examined (16,244), .48% were recommended for immediate sanatorium treatment.

[‡]This case, after full clinical investigation, refused to co-operate.

TABLE VIII

Analysis of 438 Cases of Pulmonary Tuberculosis (Post Primary), showing number of cases in each age group, with corresponding percentages (percentages in brackets).

Sex	Ages	14 Years	15-24	25-34	35-44	45-59	60 & over	Totals
	No. of Examinees	129	2,664	1,684	1,545	1,664	209	7,895
Male	Active		17 (.64)	12 (.71)	. 12 (.78)	15 (.90)	(.96)	58 (.73)
	Inactive	•••	26 (.97)	38 •(2.26)	45 (2.91)	69 (4.15)	6 (2.87)	184 (2.33)
	No. of Examinees	279	5,007	1,774	843	417	29	8,349
Female	Active	(.36)	42 (.84)	15 (.85)	7 (.83)	1 (.24)		66 (.79)
	Inactive		43 (.86)	46 (2.59)	32 (3.80)	7 (1.68)	(.69)	130 (1.55)
	No. of Examinees	408	7,671	3,458	2,388	2,081	238	16,244
Both Sexes	Active	1 (.25)	59 (.77)	27 (.78)	19 (.80)	16 (.77)	2 (.84)	124 (.76)
	Inactive		69 (.90)	84 (2.43)	77 (3.22)	76 (3.65)	8 (3.36)	314 (1.93)

TABLE IX

Cases diagnosed Active Primary Tuberculosis (Pulmonary), with Disposal.

	Total Number	Observation*	Referred to Doctor	No Action
Male	. 1	. 1		•••
Female -	10	9	1	•••
Both sexes -	. 11	10	1	•••

^{*}Observation at Central Tuberculosia Institute or Mass Radiography Centre.

In addition to the above cases of tuberculosis, the following abnormalities were diagnosed (excluding cases of bronchitis and emphysema):

Bronchiectasis -	-	-	-	-	36		
Atypical Pneumonia	-	-	-	-	5		
Pulmonary Fibrosis (nor	ı-tubercı	ılous)	-	-	14		
Asbestosis -	-	-	-	-	4		
Carcinoma of Bronchus	-	-	-	-	5		
Neurofibroma -	-	-	-	-	1		
Spontaneous Hydropnes	umothor	ax	-	-	1		
Pleural Effusion (tubero	culous)	-	-	-	2		
Pleural Thickening	-	-	-	-	238		
Cardio-vascular lesions	(congeni	ital)	-	-	10	(60%	known)
Cardio-vascular lesions	(acquire	d)	-	-	103	(62%	known)
(includes 3 Syphi	ilitic An	eurysms)				
Congenital Cystic Disea	se of Lu	ung	_	-	3		
Solitary Cyst of Lung	-	_	-	-	1		
Hydatid Cyst -	-	-	-	-	1		
Sarcoidosis -	-	-	-	-	3		
Calcification of Pericardi	um	-	-	-	1		
Dextrocardia -	••	-	-	-	1		
Substernal Thyroid		-	-	-	1		
Eventration of Diaphrag	gm	-	-	-	3		
Diaphragmatic Hernia	-	-	-	-	1		
Fractures of First Rib		-		-	4		
Cystercicosis -	-	-		-	1		

It has been reported that the percentage of cases of active tuberculosis of the lungs discovered by the various Mass Radiography Units operating in England and Wales up to the 31st December, 1945, was .36 out of a total of 797,314 individuals examined. It will be seen from Table VIII that the percentage of active cases discovered in Belfast was .76. While it is admitted that the total number of examinations (16,275) up to 31st December, 1945, was small compared with the total number for England and Wales, it can be assumed that the incidence of pulmonary tuberculosis is considerably greater here.

The treatment of active pulmonary tuberculosis demands the provision of sanatorium beds. It has always been known that these have been in short supply, and although extra beds have been provided during the past few years, the waiting period for admission to sanatoria is still one of months. If the maximum benefit is to be obtained from Mass Radiography, more beds will have to be provided in order that early cases so discovered can be admitted without any delay. If these beds are not provided, the 'early case' discovered by Mass Radiography will be found on admission to be no longer in the 'early' category, and so the object of the Mass Radiography Scheme will be defeated.

Mass Radiography has not made the diagnosis of active pulmonary tuberculosis, in some instances, any easier, as radiological lesions have been demonstrated in cases in which it is quite impossible to assess the degree of activity. Owing to the shortage of sanatorium beds, the only method of dealing with these cases is to keep them under constant observation, with serial radiographs, at the Centre, sometimes with unfortunate results. In view of this, it seems necessary that the Mass Radiography Unit should have at its disposal a certain number of observation beds, where this particular type of case could be admitted immediately for a short period for daily observation.

While the Mass Radiography Scheme was initiated for the detection of early pulmonary tuberculosis, it will be seen from the above résumé of the work that a considerable number of non-tuberculous conditions were detected. These cases are investigated at the Centre, and reports in every case sent to the individual's doctor.

In certain cases more than one examination was necessary before a final diagnosis was made. In this connection 179 large film examinations were necessary and 80 clinical examinations. This makes a total of 1,252 large film examinations and 686 clinical examinations for the period under review.

In all pulmonary cases in which a clinical examination was carried out, the estimation of the blood sedimentation rate is a routine measure. Other blood investigations (blood counts, Harrison and Kahn's tests, etc.) and Mantoux tests are carried out when considered necessary. Sputum is examined in all cases, when obtainable, by the direct and culture methods. During the six months 229 specimens of sputum were examined by the direct method, 71 being subsequently examined by the culture technique. Tubercle bacilli were found in 23 specimens by direct examination, and in 13 cases tubercle bacilli were isolated on culture. I am indebted to Dr. G. F. H. Tinsdale for carrying out the Harrison and Kahn tests at the Municipal Laboratory, Queen's University, and to Dr. L. V. Reilly, of the Municipal Sanatorium staff, for carrying out the examination of sputum and pleural fluid specimens at the Municipal Sanatorium Laboratory, Whiteabbey.

The success and smooth working of a Mass Radiography Department depends, in no small measure, on the co-operation of the managements of industrial concerns and other employers. I should like to record my acknowledgments for the valuable help afforded to me and the staff by the directorates and key personnel of the various firms during our first year. They have done much to help us to launch the Mass Radiography Scheme.

Our first 'outside' survey took place during the months of October and November in the factory of Messrs. Gallaher Ltd. I cannot speak too highly of the cooperation extended to us during our stay. Every effort was made to meet our requirements in the setting up of this temporary centre.

I am indebted to the General Practitioners of the City and surrounding districts for the keen support they have given me. Without this support much of our work would be of no avail.

My thanks are also due to my colleagues on the staff of the Central Tuberculosis Institute for the interest they have taken in the patients referred to them, although this has incurred much additional work.

Finally, it gives me great pleasure to place on record the team work of my own staff. Their united efforts have gone far to make the Mass Radiography Service efficient. I have to thank them for their help in making my own task lighter than it might have been.

Yours faithfully,

J. NORRIS WHYTE,

Medical Director.

The Report of the Medical Superintendent

on the working of

The Belfast Municipal Sanatorium

For the Year ended 31st December, 1945

I have the honour to present the twenty-second Annual Report upon the working and progress of this Institution.

CAPACITY.—The maximum number of beds in the Sanatorium is 330. The distribution of the accommodation is as follows:—

			TABL	ΕΙ			
		Tu	Pulmonary iberculosis B	eds	Surgical Bed	ds	• Total
Males	-	-	17 0		10		180
Females	-	-	120			•••	120
Children	-	-	30				30
Total	-	-	320		10		330

PERSONNEL

General Staff:—		Nursing Staff—	
Medical Superintendent -	- 1	Matron and Assistant Matron -	2
Clinical Pathologist and		Home Sister	1
Medical Officer -	- 1	Sisters °	7
Assistant Medical Officers	- 3	Theatre Sister	
Visiting Thoracic Surgeon	- 1	Staff Nurses 1	
Visiting Orthopædic Surgeon	- 1		8
Visiting Dental Surgeon -	- Î	Probationer Nurses 3	30
Dispenser and Statistical Clerk	- 1	Domestic Staff:-	
Radiographer	~ 1	Cooks	2
Laboratory Technician -	- 1	Assistant Cooks	2
Laboratory Assistant -	- 1		28
	- 4		6
School Mistresses	- 2	Miscellaneous:—	
01. 1. 1. 0. 0.		Works Superintendent -	1
Clerical Staff:—		Engineer	1
Administrative Assistant -	- 1	Gardener	1
Senior Clerk	- 1	Storekeeper	1
Clerks	- 4	Others 2	20
Total Nurs	sing Staff -	61	
Nursing Sta	iff per ten beds	1.85	

TABLE II

Annual Return shewing the Extent of Treatment from 1st January, 1945, till 31st December, 1945. (Comparative figures for the year 1944 are shown in brackets).

Whiteabbey	In	Admitted	Discharged	Died	In
	Institution	During	During	During	Institution
	31/12/44	1945	1945	1945	31/12/45
No. of Patients	317 (272)	426 (475)	407 (384)	30 (46)	306 (317)

TABLE III

Annual Return shewing the Classification of patients admitted during 1945.

Type of Case	l N	Men	W	omen	Chi	ldren	Total		
Pulmonary Tuberculosis - Surgical Tuberculosis - Non-tuberculous Unclassified Re-admissions	203 10 6 2 4	(197) (3) (4) (2) (3)	134 1 5 —	(191) (3) (2) (—) (8)	55 4 2 —	(52) (7) (1) (<u>-</u>) (2)	392 15 13 2 4	(440) (13) (7) (2) (13)	
Total	225	(209)	140	(204)	61	(62)	426	(475)	

TABLE IV

Annual Return shewing the Classification of patients discharged during 1945 (excluding those indicated in Table No. V).

Type of Case	Men	Women	Children	Тотац
Pulmonary Tuberculosis - Non-pulmonary Tuberculosis	196 (156) 10 (4)	122 (157) 5 (1)	46 (45) 5 (3)	364 (358) 20 (8)
Total	206 (160)	127 (158)	51 (48)	384 (366)

TABLE V

Annual Return indicating patients discharged during 1945, but not included in treatment survey.

	N.	len	Wo	omen	Chil	dren	Тотац		
In residence less than one month (excluding deaths and redischarges) - Redischarges - Non-tuberculous	19 	(9) (<u>—</u>) (5)	12 - 5	(23) (1) (3)	6 - 1	(7) (1) (1)	37 	(39) (2) (9)	
Temporary discharges of patients still in residence -	1	(2)	1	(3)	_	(2)	2	(7)	
Temporary discharges of patients not included above Doubtful -	3	(2) (1)		(3) (1)	_	(<u>—</u>)	3	(5) (2)	
Total	28	(19)	18	(34)	7	(11)	53	(64)	

TABLE VI

Annual Return indicating the duration of residence of patients in the Sanatorium during the year 1945.

PATIENTS DISCHARGED:

Ρ.

(1) Suffering from Pu	lmonary Tube	rculosis		• • •	267.0	days
(2) Suffering from No	on-Pulmonary	Tuberculosis			374.2	,,
(3) Suffering from P.	T.C.				200.3	, ,
(4) Observation Cases	s .				107.9	, ,
Patients Died:	,					
(1) Suffering from Pu	ılmo n ary Tube	rculosis	•••	• • •	181.1	, ,
Not included in above:						
1 Patient suffering	g from Corona	ry Thrombos	sis		298.0	, ,
1 Patient suffering	g from Carcino	ma of Peritor	neum		14.0	, ,

TABLE VII Analysis of patients with Pulmonary Tuberculosis discharged during 1945.

			Dτ	JRATI	ON C	F R	ESID	ENCE	IN	Sana	TORI	UM					
Classification upon Admission	Condition upon Discharge	,	nder 3 onth			3—6 Months		6—12 Months		Over 1 Year			Totals			Тотац	
Class T.B. Minus	Quiescent Improved N.M. Imp. Died	M 6 3 2	W 7 2 —	C 1 3	M 13 6 3 1	W 9 - 1	C 9 1 1	M 14 2 —	W 6 —	C 17 5 —	M 1 - 1	W 1 - -	C 2 3 —	M 34 11 6	W 23 2 1	C 28 10 4	85 23 11
	TOTAL	11	9	4	23	10	11	16	6	22	2	1	5	52	26	42	120
Class T.B. Plus Group 1	Quiescent Improved N.M. Imp. Died	- 1 -	=	=	1 1 —	3 	=	2 1 —	2 	=		1 1 —	= = =	3 3 —	6 1 —		9 4 —
	TOTAL	1	_		2	3	_	3	2	_	_	2		6	7	_	13
Class T.B. Plus Group 2	Quiescent Improved N.M. Imp. Died	2 4 1	<u>_</u>	=	2 3 1	1 3 2	= = =	5 6 3	3 1 1	=	10 4 3	8 7 —	=	19 17 8	12 11 4		31 28 12
	TOTAL	7	1	_	6	6	_	14	5		17	15	-	44	27		71
Class T.B. Plus Group 3	Quiescent Improved N.M. Imp. Died	1 9 4			4 15	1 9 1		2 4 8 6	7 3 5	_ _ 1	9 14 17 1	9 7 7 1		11 23 49 11	9 15 23 15	$\frac{-3}{1}$	20 41 72 27
	TOTAL	14	12	_	19	11	_	20	15	1	41	24	3	94	62	4	160
	GRAND TOTAL	33	22	4	50	30	11	53	28	23	60	42	8	196	122	46	364

N.M. Imp. = No Marked Improvement.

SURGICAL SECTION.

TABLE VIII

Patients discharged during 1945. The following is an analysis of these cases.

			DURATION OF RESIDENCE IN SANATORIUM														
Type of Disease upon Admission	Condition upon Discharge		Jnde 3 Iontl			3—6 Iontl			5—12 Ionth			Over 1 Year		Т	ОТАІ	.s	Total
Osseous	Quiescent Improved N.M. Imp. Died	M _ _ _	W _ _ 1 _	C 	M _ 1 _	W _ _ _	C	M 2	W 	C	M 1 - 2	W 1 1 1	C - 2 	M 1 2 3	W 1 1 2	C _ 2	2 5 5
	TOTAL	_	1	_	1	_	_	2		-	3	3	2	6	4	2	12
Abdominal	Quiescent Improved N.M. Imp. Died	_ _ 1 _		=======================================		_ _ _	=		<u>_</u> 1	1 =		_ _ _	=======================================	_ _ 1 _	_ _ 1	1	$\frac{1}{2}$.
	Total	1	_				-	_	1	1		_	_	1	1	1	3
Other Organs	Quiescent Improved N.M. Imp. Died	_ _ _ _		_ _ _ 1		=	_ _ _			=	=	=	=		=	_ _ _ 1	$\frac{}{3}$
	TOTAL	_	_	1	-		_	3		-	-		-	3	_	1	4
Glandular	Quiescent Improved N.M. Imp. Died	_ _ _		_ _ _ _		=	=	_	_ _ _	=		=	1 _		= =		- 1 - -
-	TOTAL	_	_	_	-	_	_	_	_	_	-	_	1		_	1	1
	GRAND TOTAL	1	1	1	1		_	5	1	1	3	3	3	10	5	5	20

COMPLICATIONS.

The following complications of pulmonary tuberculosis were noted during residence in hospital.

		Other	form	is of	Tuberculosis—				
Abdomen	-	-	-	4	Intestines	-	-	-	8
Ankle	-	-	-	1	Ischio-rectal	-	-	-	2
Cervical gland	s	-	-	6	Kidney	-	-	-	2
Ear	-	-	-	1	Knee	-	-	-	1
Empyema	-	-	-	4	Larynx	-	-	-	24
Epididymis	-	-	-	3	Sinus (discharg	ging)	-	-	1
Fistula-in-ano		-	-	3	Spine	-	-	-	2
Hip	-	-	-	1	Tongue	-	-	-	1
			Othe	er Dis	eases—				
Abscess—foot					Albuminuria	-	-	-	1
glut					Alopœcia	-	-	-	1
	ndible				Amyloid disea	se-rena	.1	-	1
peri	i-anal				Amyloid disea	se	-	-	3
ster					Anæmia	-	-	-	1
Abortion-inc	omplete	-	-	1	Angina pector	is	-	-	1
Acne	-	-	-	1	Asbestosis	-	-	-	1

Asthma	-		-	2	Neurasthenia	-	-	-	1
Bazin's disease		-	-	2	Oedema	-	-	-	1
Birth palsy	- "	~~	-	1	Otitis media	-	-	-	6
Bronchiectasis	-	-	-	2	Paralysis—L.	phrenic	-	_	1
Bronchitis	-	-	-	7	Periostitis	^ -	-	-	1
Cholecystitis	-	-	-	1	Pneumothorax	spont	aneous	-	2
Conjunctivitis	-	-	-	2	Poliomyelitis—	-old	-	-	1
Dermatitis	-	-	-	3	Pregnancy	-	-	-	4
Diabetes	-	-	-	1	Pregnancy and	lincomp	lete aboi	rtion	1
Emphysema	-	-	-	14	Psychosis	-	-	-	1
Epiphysitis	-	-	-	1	Psycho-neuros	is	-	-	1
Fistula—pleura	al	-	-	1	Pyrexia—trans	sient	-	-	1
Hæmorrhoids		-	-	7	Pyuria	-	-	-	1
Herpes Zoster		-	-	1	Recent confine	ment	-	-	9
* * * * * * * * * * * * * * * * * * *	-	-	-	1	Syphilis	-	-	-	3
Ichthyosis	-	-	-	1	Sinusitis—max	killary	-	-	1
Laryngitis—ca	tarrhal	-	-	1	Thrombosis	-	-	-	2
Methritis	-	-	-	1	Tonsillitis	-	-	-	2
Myelitis	-	-	-	1	Ulcer—peptic		-	-	1

TABLE IX

		Dura	TION OF R	esidençe I	Prior to D	ЕАТН		
		Days			Mor	nths		
	1—10	11—20	21—31	1—3	3—6	6—12	Over 12	Total
Number of Cases -	1	'3	1	9	<u>.</u>	13	2	29

¹ death non-tuberculous, 14 days.

. TABLE \mathbf{X} Classification of Patients in residence 28 days or less.

		Men	Women	Children	Тотац
Minus -	-	11	4	6	21
Group 1 Plus -	-	_		_	_
Group 2 Plus -	-	, 4	1	_	5
Group 3 Plus -	-	1	10	_	11
Osseous -	- [_	_	_	_
Abdominal -	- \	_	_	_	
Glandular -	-	_	_	_	
Other Organs -	-	1	_	1	2
Doubtful -	-	_	_	_	_
Non-tuberculous	-	4	1	_	5
Unclassified -	-	2		<u> </u>	2
Total -	-	23	16	7	46

TABLE XI

	Total	46
ous Table.	Death	9
Cause of discharge of patients in previous Table.	Own Request	12
ischarge of par	Transferred	· ∞
Cause of d	Recommended	9
	Against Medical Advice	4

TABLE XII

Artificial Pneumothorax treatment. Results on discharge 1945.

							recard on abeliange roto.	Smile	101				
	No. of Cases		SPUTUM ON ADMISSION	SPUTT DISC	SPUTUM ON DISCHARGE	INTERNAL PNEU- MOLYSIS	PHRENIC OPERATION			R	RESULT		
		Pos.	Neg.	Pos.	Neg.			Ö	Imp.	LS.Q.	Worse	Died	Total
Collapse Satisfactory -	95												
Hilar	36	34	2	7	29	27	2	21	12	-	, 2	I	36
Mediastinal	17	15	2	2	15	6	-	:12	2				17
Partial -	3	2	-		3	2	.	2	-	1			3
Collapse Unsatisfactory -	31	29	2	18	13	11	2	7	12	7	3	2	31
No Collapse	15	13	2	6	9	1	2	4	9	20			15
Total	102	93	6	36	99	50	. 7	46	36	13	2	2	102

1 A.P. unclassified.

OPERATIVE TREATMENT.

A.P. Induction		-	-	70	Phrenic operation	-	-	19
A.P. Induction	att€	empted	-	28	Thoracoplasty -	-	-	29
Pneumo-peritor	eum	Induction	-	4	Thoracoscopy -		-	7
A.P. Refills	-	-	-	4026	Chest aspiration	-	-	121
Bronchoscopy	-	-	-	3	Nephrectomy -	-	-	2
Lipiodol	-	-	-	10	Orchidectomy -	-	-	1
Pneumolysis	-	-	-	64				

TABLE XIII

Table shewing the average number of patients in residence per day for the past ten years.

Financial Y	ear			
ending Mai	rch			Number
1937				243.78
1938		• • •		237.90
1939			• • •	231.39
1940				235.89
1941				232.39
1942				230.78
1943				246.66
1944				268.33
1945				303.67
1946	•••			317.64

REPORT OF THE WORK OF THE EAR, NOSE, AND THROAT DEPARTMENT.

By T. Kennedy Hunter, M.B., F.R.C.S., D.L.O.

Ninety-seven new cases were examined during the year and there were forty-three re-examinations. This is an increase of thirty in the number of new cases compared with the previous year.

Of the new cases, fifteen were definite cases of Tuberculous Laryngitis. There were three doubtful cases.

The sites, in order of frequency, were: inter-arytenoid space, epiglottis, true cords, false cords, arytenoids, and aryteno-epiglottic folds.

There are six cases of non-tuberculous disease of the larynx, twenty-five cases of aural disease, twelve cases of nasal disease, and eight cases of pharyngeal disease—all non-tuberculous. Lavage of maxillary sinus was carried out five times and diagnostic bronchoscopy twice. One case of Papilloma of vocal cord was operated on.

REPORT OF THE X-RAY DEPARTMENT, 1945.

		X	Ray Pho	otograp	hs—			
	Pulm			-		1,459		
•	Surgi	cal	-	-	-	151		
	Bariu	m M	eal	-	-	17		
	Dent	al	-	-	-	4		
	.Lipio	dol	-	-	-	21		
	Rena	l	-	-	-	14		
		_				1,666		
	Screen.	Exam	inations	-	-	2,497		
Kromayer Lamp	-	-	-	10) patie	nts had	106	treatments.
Radiant Heat	-	-	-	9		, ,	54	, ,
Infra Red	-	-	-	1	L	, ,	2	, ,
Ultra-Violet Ligh	at	-	-	2	2	, ,	50	, ,
(carbon arc)								

REPORT OF THE VISITING DENTAL SURGEON

FOR THE YEAR 1945.

				Sanatorium		Children's Hospi	tal
Extractions	-	-	-	182		12	
Examinations	and	Dressings	-	238		67	
Scalings	-	-	-	19		5	
Fillings	-	-		50	•••	3	

REPORT OF THE PATHOLOGICAL LABORATORY, 1945.

Total number	of inve	estiga	ations	12,847	
Blood-				Pleural Fluid—	
Cholesterol -	-	-	9	Bacteriological	49
Plasma proțein	-	-	6	Cytological	$\frac{10}{42}$
Phosphatase -	-	-	5		
Serum albumin	-	-	5 5	Cerebro-Spinal Fluid—	
Serum globulin	-	-			
Serum protein		-	15	Complete investigation -	15
Sugar -	-	-	34	77 ::	
Urea -	-	-	11	Urine— .	
Van den Bergh	-	-	2	Chemical examination -	100
Complete counts	-	-	21	Bacteriological	90
Grouping -	-	-	30	0	
Hæmoglobin	-	-	16	Pus—	
Hæmatocrit	-	-	16	Dantanial animal	. 140
Sedimentation rate	-	-	2,768	Bacteriological	148
Congo red absorption	n tests	-	6	M:	
Transfusions	-	-	30	Miscellaneous—	
C. I				Histological examinations -	75
Sputum—				Post-mortem examinations -	2
Direct examination—	_			Vitamin C estimation in Orange	
B. tuberculosis	-		5,561	Juice	2
Culture -	-	-	3,630	Complete water examination -	7
Asbestosis bodies	-	-	6	Phosphatase and bacteriological	
Malignant cells	-	-	8	tests in milk	37
Spirilla -	-	-	9	Preparation of tuberculin	
Laryngeal reflex	-	-	62	vaccines	25
D ' 1045 1	1	C	•	1	

During 1945 the number of patients on the waiting-list has increased further. The number was 98 in January, 1944; 216 in December, 1944; 389 in December, 1945. The causes of this very large increase have been referred to in the Chief Tuberculosis Officer's report.

The average duration of residence has also continued to increase (see Table VI), which is partly due to the extension of bilateral collapse methods of treatment. It is gratifying that only fourteen patients left the Sanatorium against medical advice during the year.

A new and larger operating theatre has been provided by the alteration of a ward on the ground floor of the main hospital building. The need for this advance is shown by the steady increase in surgical work. Several new items of surgical equipment have been provided, and delivery of other articles ordered during the year is expected soon.

Other improvements include the erection of two large "Iris" huts for recreation, occupational therapy, and workshops. When these huts are completed, the present recreation room will be converted to a ward for male patients, providing twenty additional beds. A sputum room has also been planned for the main hospital, and a lorry has been purchased from the Civil Defence Authority. Painting and maintenance of the property have been continued as far as war-time conditions allowed.

Treatment is still continued mainly on the old lines, but, in addition, the medical and surgical staff have given attention to certain new methods, which promise to be of value. Besides rest, fresh air, and a wholesome diet, the means of attack on pulmonary tuberculosis continues to be collapse therapy. The various forms of collapse treatment, which have produced good permanent results elsewhere, are proving satisfactory at Whiteabbey. The period of hospitalization is long and wearisome for the patient, the medical and nursing care involved demand the highest degree of patience and skill, but the results justify the time and effort expended on this work. From the public health point of view, the conversion of many infectious cases to the negative group is a matter of great importance. A few special points may be mentioned in connection with the development of collapse treatment in this institution.

- 1. The number of cases of artificial pneumothorax continues to increase, and more than half of these require the operation of adhesion-cutting.
- 2. Bi-lateral collapse is being used increasingly with good results. The combination of artificial pneumothorax on one side, with the modern Semb-thoracoplasty on the other side, has proved highly successful in selected patients.

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- 3. The new method of resting the lungs indirectly by pneumo-peritoneum continues to produce encouraging results. It is particularly valuable, in that it may be applicable after artificial pneumothorax has failed.
- 4. Failure to collapse the lung by pneumothorax does not mean that the patient is doomed to chronic invalidism or early death. Long continued rest in bed, followed, if necessary, by thoracoplasty, may bring about sound healing in such cases.

The statistical work of classifying former patients has been continued, and a special inquiry has been begun with regard to family history of tuberculosis.

The instruction of nurses has continued for the certificate of the Tuberculosis Association and for the State Preliminary Examination. During the year six nurses passed Part 1 and six nurses passed Part 2 of the Tuberculosis Association examination, and seven nurses, a 100 per cent. of the entry, were successful in the State Preliminary Examination.

The Red Cross and St. John Organisation have continued to grant materials for handicraft work for service patients, and again our grateful thanks are due to the voluntary worker, Mrs. Crawford Browne, for unfailing assistance and encouragement.

The hospital has remained full throughout the year, and medical, nursing, administrative, domestic, and outdoor staff have spared no efforts for the well-being

and comfort of the patients.

The work of the chaplains has again earned the deep appreciation of patients and staff alike. The religious services have been well attended and sick patients have been regularly visited in the wards. The religious instruction of the children has also

been carried on throughout the year.

We have been very fortunate in the entertainments provided by kind friends during the year. Special mention should be made of the Excelsior Male Voice Choir and associated artists, including Mr. Samuel McComb and Mr. Reginald Patterson, and of the Toc H Organisation, which has given us a splendid series of film shows. The provision of a separate film show for orthopædic patients in Pavilion 1 was particularly welcome. Others to whom our sincere thanks are due include the undermentioned, who arranged concerts and entertainments:-

> Rev. W. B. McMurray. Rev. Father McFerran. Mr. Freddie Sales.

Mr. Sloan.

Mr. R. McCormac. Ohio Serenaders.

E.N.S.A. Concert, per Mr. Greer Walker.

The Red Hand Dramatic Society.

Salvation Army.

Symington Memorial Flute Band.

Agnes Street Temperance Silver Band.

Colonel Eager Silver Band.

55th Old Boys.

Gifts were received from the following during the year:—

The British Legion (Whiteabbey).

W.V.S.

Mrs. Newton.

Mr. Campbell.

Mrs. Megaw.

British Red Cross, 64th Belfast Detachment.

Unionist Association, per Mrs. Hunter.

Miss Crawford.

Portrush Hospital Supply Depot.

Mrs. Baillie.

Sir William Robinson.

British Red Cross, 50th Belfast Detachment.

The British Legion (Whitehouse).

Forces Library.

Yours faithfully,

B. R. CLARKE,

MUNICIPAL CHILDREN'S HOSPITAL

Greenisland

The Report of the Visiting Surgeon

For the Year ended 31st December, 1945

To the Chief Tuberculosis Officer.

Dear Dr. Clarke,

I submit my report on the clinical work of the hospital for the year 1945.

On the 1st January, 1945, there were forty-four patients in hospital, fifteen patients were admitted during the year, and twelve were discharged. Forty-seven patients remained in hospital on the 31st December.

Of the twelve patients discharged, one died from tuberculous meningitis after only thirteen days in hospital, nine were discharged with disease apparently arrested, and two were removed by the parents. The last two showed considerable improvement.

As usual, there were many cases of sore throat, thirty-six in all, but none of serious import. Twenty-nine swabs were sent for examination for diphtheria. Only two proved positive, one a nasal infection without toxæmia, and one case of tonsillar diphtheria of mild degree. Both were temporarily transferred to Purdysburn Fever Hospital. I believe the incidence of "sore throat" might be decreased by the provision of a dish steriliser.

At the Royal Victoria Hospital I had fifty-four visits from old patients or from patients sent from the Tuberculous Institute for an opinion.

Numbers of Ad	MISSIONS	AND	Discharges	During	1945.
Remained in hospital of	on 31st D	eceml	ber, 1944		
Admitted during 1945	•				
			T . 1		
			Total	• • •	•••
Discharged		• • •			
Died					
Removed by parents		•••	•••		•••
			TC 1		
			Total	• • •	• • •
Remained in hospital	on 1st Ja	nuary	7, 1946		
Conditions	FOR WHIC	н Ра	TIENTS WERE	ADMITT	ED.
Spinal caries					
Hip-joint disease					
Tuberculosis of knee					
Tuberculosis of ankle			• • •		
Tuberculosis of elbow					
Multiple lesions, ankle	e, finger,	and f	orearm		
Abdominal, with incor					
			Total		

DISCHARGES DURING 1945. Spinal caries— Disease arrested 1 Died 1 Hip-joint disease— Disease arrested 3 . . . Knee Joint-Disease arrested ... 1 Removed C.M.A., improved Hand Bones— Disease arrested 1 Foot Bones— Disease arrested ... 3 Multiple Lesions— Removed C.M.A., improved 1 REMAINED IN HOSPITAL ON 1ST JANUARY, 1946. Spinal caries 23 Hip-joint disease 12 Tuberculosis of knee ... 5 . . . Tuberculous abdominal adenitis ... 1 Tuberculosis of elbow-joint . . . 1 Tuberculosis of ankle-joint 2 Tuberculosis of tarsus ... 1 Multiple tuberculous lesions 2

Total

. . .

47

MUNICIPAL CHILDREN'S HOSPITAL, Greenisland

Details of patients discharged during 1945.

SPINAL CARIES

Disease arrested - - - - 1 Died - - - - - - 1

CONDITION ON D1sCHARGE	A well-developed child with no deformity.	
CAUSE OF DISCHARGE	(1) Temporary for scarlet fever.(2) Disease arrested.	Died.
Condition on Admission	Caries 10th and 11th thoracic vertebræ; sharp kyphos. (2) Disease arrested.	Spinal caries and tuberculous Died.
NUMBER OF DAYS TREATED	(1) 1,022 (2) 837	13
Sex	<u>.</u>	M
AGE ON ADMISSION	2 years	2 years
REGISTER NUMBER	497 and 564	009

HIP-JOINT DISEASE

Disease arrested - - - - 3

Healthy child. Full mobility in hip.	A few degrees of movement in hip, Ninety degrees of movement in knee. Health excellent.	Cavity filled in. Joint space not lost. Full mobility.
Disease arrested.	Disease arrested.	Disease arrested.
Muscle spasm, rarefaction Disease arrested. roof of acetabulum, left hip.	Necrosis head of femur and acctabulum, left hip. Later developed swelling right knee.	Rarefaction and cavity formation in roof of acetabulum, left hip.
824	1,542	921
ſī,	M	M
6 years	16 years	12 years
544	509	554

KNEE-JOINT

Disease arrested - - - - 1 Removed C.M.A. - - . - 1

rested. On first discharge was well, with ninety degrees movement. After twenty months complained of pain, and was re-admitted. On final discharge, knee quiescent, with eighty degrees of movement.	nother Swelling subsided and knee was quiescent, but time of treatment was insufficient. Disease may recur.
(1) Disease arrested. (2) Mumps. (3) Disease arrested.	Removed by mother C.M.A.
White swelling left knee.	White swelling right knee.
(1) 977 (2) 10 (3) 327	254
ţ.	M
6 years	5 9/12 years
and 581,	587

Details of Patients Discharged during 1945-continued

HAND BONES

Disease arrested - - - -

Condition On Discharge	A healthy child. Fingers healed and mobile.
CAUSE OF D1SCHARGE	Disease arrested.
Condition on Admission	Tuberculous dactylitis, with sinuses in left index finger, right ring finger, and right little finger.
NUMBER OF DAYS TREATED	739
Sex	[
AGE ON ADMISSION	2 years
REGISTER NUMBER	561

FOOT BONES

Disease arrested - - - - 3

Disease arrested. Cavity filled in and bone consolidated. Health good.	Disease arrested. Walks well. Liable to recurrent infanmation in eyes.	Disease arrested. No clinical signs of disease.
Cavity in right oscalcis, following operation for caries.	Caries metatarso — cuneiform Disease arrested. point. Blepharitis and corneal ulcers.	Caries left astragalo-calcanean joint. Tuberculosis sheath of right tendo-achilles with sinus.
675	1,242	580 and 1,410
M	íz.	<u>-</u>
2½ years	3 7/12 years	5 years
574	539	489 and 524

MULTIPLE LESIONS

Health improved, head healed, and opening in frontal bone almost filled in. Right elbow ankylosed and two sinuses still present.
Removed by father C.M.A.
Was discharged on 11/6/40 Removed by father after successful treatment of tuberculous right elbow and caries left frontal bone, with cavity extending into meninges. Sinuses had recurred in right elbow.
133
[*.
14 years
592

Infectious Diseases.

Diphtheria (mild)—						
Nasal		•••			• • •	1
Faucial						1
Sore throats		•••				36
Diarrhœa						2
Impetigo			• • •			4
	Other	Compli	CATIONS.			
Otitis media						7
*Acute mastoiditis		•••				1
Coryza		•••	•••	•••		1
Epistaxis	• • •					7
Styes						4
Corneal ulcer	• • •	•••				1
Conjunctivitis			•••			4
Vomiting						23
Bronchitis					· · · · ·	1
F.B swallowed and p	passed					1
Minor cuts and abrasi	ons					7
Boils			• • •			6
Herpes						7
Urticaria		`	•••		• • •	1
Sores of minor degree	:					
Plaster						_ 1
Pressure					• • •	1
Adhesive extension	ons					5
*Transferred, temporarily, to Dufferin Hospital for operation. LLINESS CONTRACTED BY MEMBERS OF THE STAFF						

ILLNESS CONTRACTED BY MEMBERS OF THE STAFF.

Pleurisy			 		1
Diphtheria			 		1
Influenza			 		4
Sore throats			 	•••	6
Gastro-enteritis			 	• • •	3
Minor sepsis of fingers			 		3
Minor injuries		• • •	 		12
Boils			 		1
Eczema, external audit	tory mea	.tus	 		1
P.U.O.			 		1

With the exception of a probationer who had to be sent home suffering from pleurisy, none of the staff suffered from serious illness.

I am,

Your obedient Servant,

H. P. MALCOLM,

Visiting Surgeon.

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